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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : INCRP SERVICES INC
Account Number : 120120000007
Phone : (702)866-2500
Fax Number : (702)866-2689

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Managedreports@incorp.com

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FOREIGN PROFIT/NONPROFIT CORPORATION
Live Oak Banking Company

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$70.00

45
10/21/20



H200003632403

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Live Oak Banking Company
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kim Barajas
Name of Person
InCorp Services, Inc.
Firm/Company
3773 Howard Hughes Parkway Suite 500S
Address
Las Vegas, NV 89169
City/State and Zip code
managedreports@incorp.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Kim Barajas for InCorp Services, Inc.	at (<u>702</u>)	<u>866-2500</u>
Name of Person	Area Code	Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

H200003632403

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

H200003632403

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Live Oak Banking Company
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. North Carolina 3. 80-0182298
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/25/2008 5. _____
 (Date of incorporation) (Date of duration, if other than perpetual)

6. Upon Registration
 (Date first transacted business in Florida, if prior to registration)
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1741 Tiburon Drive, Wilmington, NC 28403
 (Principal office street address)

_____ (Current mailing address, if different)

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8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: InCorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee, Florida 33470
(City) (Zip code)

9. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Kim Barajas Kim Barajas on behalf of InCorp Services, Inc.
 (Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

(see Officers and Directors attachment)

<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

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 TALLAHASSEE, FLORIDA

<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. Sally Davis
 Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Sally Davis, Assistant Secretary
 (Typed or printed name and capacity of person signing application)

H200003632403

Florida Department of State
Registration Section
Division of Corporations

Application by Foreign Corporation for Authorization to
Transact Business in Florida

Live Oak Banking Company
(continued)

Item number 11A – Names, titles and addresses of the primary officers and/or directors:

M. Huntley Garriott, Jr., President ✓
1741 Tiburon Drive
Wilmington, NC 28403

Gregory W. Seward, Secretary
1741 Tiburon Drive
Wilmington, NC 28403

Walter J. Phifer, Treasurer ✓
1741 Tiburon Drive
Wilmington, NC 28403

James S. Mahan, III, CEO & Chairman
1741 Tiburon Drive
Wilmington, NC 28403

James S. Mahan, III, Director ✓
1741 Tiburon Drive
Wilmington, NC 28403

William L. Williams, III, Director
1741 Tiburon Drive
Wilmington, NC 28403

William H. Cameron, Director ✓
1741 Tiburon Drive
Wilmington, NC 28403

Diane B. Glossman, Director
1741 Tiburon Drive
Wilmington, NC 28403

Glen F. Hoffsis, Director ✓
1741 Tiburon Drive
Wilmington, NC 28403

Howard K. Landis, III, Director
1741 Tiburon Drive
Wilmington, NC 28403

Milton E. Petty, Director ✓
1741 Tiburon Drive
Wilmington, NC 28403

Neil L. Underwood, Director
1741 Tiburon Drive
Wilmington, NC 28403

Tonya W. Bradford, Director
1741 Tiburon Drive
Wilmington, NC 28403

Sally Davis, Assistant Secretary
1741 Tiburon Drive
Wilmington, NC 28403

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WILMINGTON, NC

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FLORIDA OFFICE OF

H200003632403

FINANCIAL REGULATION

www.flofr.com

April 15, 2020

Ms. Sally S. Davis
1741 Tiburon Drive
Wilmington, NC 28403

Re: Live Oak Banking Company


Dear Ms. Davis:

Reference is made to your recent letter requesting approval to register the above-referenced fictitious name with the Florida Secretary of State by Live Oak Banking Company, which is a North Carolina state-chartered bank headquartered in Wilmington, North Carolina.

2020 OCT 20 P 4 46
FALL DUNASSEE
OFFICE OF
SECRETARY OF STATE

Section 655.922, Florida Statutes, exempts a financial institution, holding company or its subsidiaries from the prohibition of using the word "bank," "banco," "banque," "banker," "banking," "trust company," "savings and loan association," "savings bank," or "credit union," or words of similar import, in any context or in any manner in its corporate name. Therefore, this Office will not object to the use of the above referenced name being registered to transact business in the state of Florida. However, this correspondence is not intended to grant the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,



Jeremy W. Smith
Director
Division of Financial Institutions

AV:trd

cc: Lyn Shoffstall, Chief, Bureau of Commercial Recordings, Division of Corporations,
Department of State



NORTH CAROLINA

Department of the Secretary of State

H200003632403

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

LIVE OAK BANKING COMPANY

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 25th day of February, 2008, with its period of duration being Perpetual.

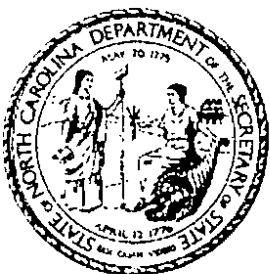
I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

2020 OCT 19 11:20 AM

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 19th day of October, 2020.

Elaine F. Marshall

Secretary of State



Scan to verify online.