

12/14/23, 10:19 AM

Division of Corporations

F230000006905

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000426087 3)))



H230004260973ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (614)280-3338
 Fax Number : (614)573-3996

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

Email Address: KMCOFFMAN@CIVISTA.BANK

**FOREIGN PROFIT/NONPROFIT CORPORATION
 CIVISTA BANK CO**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

RECEIVED
 2023 DEC 14 AM 11:22
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

2023 DEC 14 PM 12:09

Electronic Filing Menu

Corporate Filing Menu

Help

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. Civista Bank Co.
(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. Ohio 3. 34-4204840
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 7/16/1987 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 100 E WATER ST, SANDUSKY, OH 44870-2524
(Principal office street address)

(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road


Plantation FL. 33324
(City) (Zip code)

2023 DEC 14 PM 12:09

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.

C T Corporation System Scan L. Emerick, Assistant Secretary

By: 
(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.

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

A. DIRECTORS

Chairman Name: Dennis G. Shaffer
 Vice Chairman Address: 100 E WATER ST
 Director SANDUSKY, OH 44870-2524
 President _____
 Vice President _____
 Secretary Treasurer
 Other CFO Other _____

Chairman Name: James O. Miller
 Vice Chairman Address: 100 E WATER ST
 Director SANDUSKY, OH 44870-2524
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Todd A. Michel
 Vice Chairman Address: 100 E WATER ST
 Director SANDUSKY, OH 44870-2524
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Dennis E. Murray
 Vice Chairman Address: 100 E WATER ST
 Director SANDUSKY, OH 44870-2524
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Lance A. Morrison
 Vice Chairman Address: 100 E WATER ST
 Director SANDUSKY, OH 44870-2524
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: John O. Bacon
 Vice Chairman Address: 100 E WATER ST
 Director SANDUSKY, OH 44870-2524
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ 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. Rachel O'Connor
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. Rachel O'Connor, Vice President
(Typed or printed name and capacity of person signing application)

Attachment for Officers and Directors: - CIVISTA BANK

Address for Officers and Directors	100 East Water Street, Sandusky, OH 44870
---	---

Name	Title
Jule A. Matlin	Director
Allen R. Nickles	Director
Mary P. Oliver	Director
Harry Singer	Director
Gerald E. Wurm	Director
Clyde A. Perfect	Director
Darci Congrove	Director
Mark MacDoe	Director
Nathan E. Weeks	Director
Lorina W. Wise	Director

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show CIVISTA BANK, an Ohio corporation, Charter No. 705141, having its principal location in Sandusky, County of Erie, was incorporated on July 16, 1987 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 10th day of November, A.D. 2023.

A handwritten signature in cursive script, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 202331402818