

F24000003302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

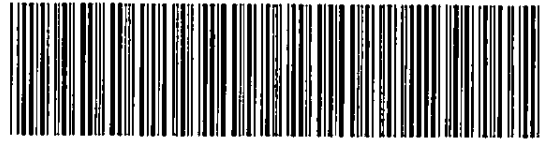
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
W24000061627

Office Use Only



100427687461

2024 APR 17 PM 10:10

Director of Corporations & Finance  
TALLAHASSEE, FLORIDA

2024 APR 17 PM 3:17

RECEIVED

JUN 19 2024  
K. Brumbley



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 18, 2024

CT CORP

SUBJECT: LEAD BANK  
Ref. Number: W24000061627

**CORRECTED**  
Please Allow For  
Same File Date

We have received your document for LEAD BANK and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$300.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Corey Pettway  
Regulatory Specialist II

Letter Number: 124A00008476

RECEIVED  
2024 JUN 18 PM 1:54  
TALLAHASSEE, FLORIDA

**CT CORP**  
**(850) 656-4724**  
**3458 lakesore Drive**  
**Tallahassee, FL 32312**

**Date:** 04/17/2024  
 Acc#I20160000072

*eric SW*

|             |               |
|-------------|---------------|
| Name:       | Lead Bank     |
| Document #: |               |
| Order #:    | 15300562 - 30 |

|                                   |                          |                         |
|-----------------------------------|--------------------------|-------------------------|
| Certified Copy of Arts & Amend:   | <input type="checkbox"/> |                         |
| Plain Copy:                       | <input type="checkbox"/> |                         |
| Certificate of Good Standing:     | <input type="checkbox"/> |                         |
| Certified Copy of                 | <input type="checkbox"/> |                         |
| Apostille/Notarial Certification: | <input type="checkbox"/> | Country of Destination: |
|                                   |                          | Number of Certs:        |

|   |  |
|---|--|
| Filing: <input checked="" type="checkbox"/> | Certified: <input checked="" type="checkbox"/> |
|   | Plain: <input type="checkbox"/>                |
|   | COGS: <input type="checkbox"/>                 |

Email Address for Annual Report Notifications:

Availability \_\_\_\_\_  
 Document \_\_\_\_\_  
 Examiner \_\_\_\_\_  
 Updater \_\_\_\_\_  
 Verifier \_\_\_\_\_  
 W.P. Verifier \_\_\_\_\_  
 Ref# \_\_\_\_\_

Amount: \$ **378.75**

Thank you!

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lead Bank

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:

Erica Khalili

Name of Person

Lead Bank

Firm/Company

1801 Main Street

Address

Kansas City MO 64108

City/State and Zip code

legal@lead.bank

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
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

**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. Lead Bank \_\_\_\_\_  
(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. Missouri 3. 44-0255510  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01-12-1928 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. 8/1/22  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1801 Main St, Kansas City, Missouri 64108  
(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)

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  
By: *Candice Pyratas*  
(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]:

2024 JUN 17 11:10:00

**A. DIRECTORS**

Chairman Name: Arnold, Christian  
 Vice Chairman Address: 1801 MAIN ST  
 Director Kansas City, MO 64108  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Bynum, Gregory  
 Vice Chairman Address: 1801 MAIN ST  
 Director Kansas City, MO 64108  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

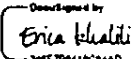
Chairman Name: \_\_\_\_\_  
 Vice Chairman Address: \_\_\_\_\_  
 Director \_\_\_\_\_  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Clouse, Brooke  
 Vice Chairman Address: 1801 MAIN ST  
 Director Kansas City, MO 64108  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other COO \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Dickson, Kristine  
 Vice Chairman Address: 1801 MAIN ST  
 Director Kansas City, MO. 64108  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other CFO \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Khalili, Erica  
 Vice Chairman Address: 1801 MAIN ST  
 Director Kansas City, MO. 64108  
 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. \_\_\_\_\_  \_\_\_\_\_  
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. Erica Khalili - Secretary  
(Typed or printed name and capacity of person signing application)



## CERTIFICATE OF CORPORATE GOOD STANDING

*TO ALL TO WHOM THESE PRESENTS SHALL COME:*

I, *Mick Campbell*, Commissioner of Finance of the State of Missouri, do hereby certify that the records under my care and custody in my office reveal that

**LEAD BANK**

**Kansas City, Missouri**

Charter No. 2418, is a banking corporation in good standing in the State of Missouri.

*IN TESTIMONY WHEREOF*, I hereunto set my hand and affix the Seal of my office. Done at the City of Jefferson, State of Missouri, on this twenty fifth day of January, Two Thousand and Twenty-Four.



Commissioner



Commissioner Russell C. Weigel, III

VIA ELECTRONIC MAIL

June 6, 2024

Ms. Jenny Bezis, Paralegal  
1801 Main Street  
Kansas City, MO 64108

Re: **Lead Bank**

Dear Ms. Bezis:

Reference is made to your recent letter requesting approval to register the above-referenced name with the Florida Secretary of State by Lead Bank. The bank is a Kansas City, Missouri state-chartered bank, headquartered in Kansas City, Missouri, and regulated by the Office of State Bank Commissioner in Kansas City, Missouri.

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,

Jason M. Guevara  
Financial Administrator  
Division of Financial Institutions  
Office of Financial Regulation

JMG:td

cc: Lee Yarbrough, Chief, Bureau of Commercial Recordings, Division of Corporations,  
Department of State