# 193115

## **VOID**

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Needs approval from the Office of Financial Regulation

of Financial Regulation
11/17/23 dcc

### **VOID**

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: COMMUNITY S	TATE BANK			
DOCUMENT NUMB					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	atter to the following:			
, .	THOMAS J. FONTAINE				
_		Name of Contact Persor	1		
COMMUNITY STATE BANK					
_	Firm/ Company				
8	III SOUTH WALNUT STE	REET			
_		Address	<del></del>		
S	STARKE, FL 32091				
_		City/ State and Zip Code	;		
ŋ	TJF@COMMUNITYSTATI	EBANK-FL.COM			
	E-mail address: (to be u	sed for future annual report	notification)		
For further information THOMAS J. FONTAIN	concerning this matter, plea	se call: at (	, 964-7830		
Name of Contact Person		Area Coo	le & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amendi Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		



#### Articles of Amendment to Articles of Incorporation of

COMMUNITY STATE BANK

(Name of Corporati	ion as currently filed with the Fl	orida Dept. of State)	
193115			
(Docum	ment Number of Corporation (if kn	nown)	
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	a Statutes, this Florida Profit Corp	poration adopts the followin	ig amendment(
. If amending name, enter the new name of the c	orporation:		
DLP BANK			The new
ame must be distinguishable and contain the word "c Inc.," or Co.," or the designation "Corp," "Inc. chartered," "professional association," or the abbro	" or "Co". A professional corp		on "Corp.,"
. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>		
. If amending the registered agent and/or registe new registered agent and/or the new registered		ter the name of the	<del></del>
Name of New Registered Agent		····	_
<del></del>	(Florida street address)		_
New Registered Office Address:	,	. Florida	
Hew Registered Office Address.	(City)	,	Code)
lew Registered Agent's Signature, if changing Res hereby accept the appointment as registered agent.	<u>zistered Agent:</u> I am familiar with and accept the	obligations of the position.	
Sion	ature of New Registered Agent, if a	changing	-
្សា <u>ខ្</u> តីក	and coffien negatorea rigem, if		

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			· · · · · · · · · · · · · · · · · · ·
Add			<del></del>
Remove			
Keniove			

amending or adding additional Articles, enter change(s) here:	VOID
ach additional sheets, if necessary). (Be specific)	
	1.11
· · · · · · · · · · · · · · · · · · ·	
	*
an amendment provides for an exchange, reclassification, or cancellation of issued	i shares,
an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itself (if not applicable, indicate N/A)	elf:
(y not applicante, inalcate (N/A)	
	<del></del> -

VOID

The date of each amendment		, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	NOVEMBER 13, 2023	
	(no more than 90 days after	amendment file date)
	his block does not meet the applicable statute ne Department of State's records.	ory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of dir	rectors without shareholder action and shareholder
☐ The amendment(s) was/wei by the shareholders was/w	e adopted by the shareholders. The number of ere sufficient for approval.	f votes cast for the amendment(s)
	e approved by the shareholders through voting d for each voting group entitled to vote separa	
"The number of votes	cast for the amendment(s) was/were sufficien	t for approval
by		."
	(voting group)	-
Dated	A AA	
se	y a director, president or other officer – if dire lected, by an incorporator – if in the hands of a pointed fiduciary by that fiduciary)	
	THOMAS J. FONTAINE	
	(Typed or printed name of pe	rson signing)
	CEO	
	(Title of person signing)	

#### COMMUNITY STATE BANK

#### ACTION OF SOLE SHAREHOLDER TAKEN IN WRITING IN LIEU OF A MEETING

The undersigned, being the sole shareholder of Community State Bank, a Florida banking corporation (the "Bank"), acting pursuant to applicable Florida Statutes and in accordance with the authority contained in the Bank's Articles of Incorporation and Bylaws, hereby takes the following actions and adopts the following resolutions in writing in lieu of a meeting, effective as of October 25, 2023:

#### Amendment to Articles of Incorporation

WHEREAS, the board of directors and officers of the Bank desire to amend its Articles of Incorporation to change the Bank's name.

NOW, THEREFORE, BE IT RESOLVED, that Article I of the Bank's Articles of Incorporation be and hereby is amended and replaced in its entirety with the following:

The name of the Corporation shall be: DLP Bank.

FURTHER RESOLVED, that this amendment shall become effective as of November 13, 2023 and upon filing with the office of the Florida Office of Financial Regulation, Division of Financial Institutions and the Florida Department of State.

FURTHER RESOLVED, that any officer of the Bank be, and hereby is, authorized and directed to make, execute and acknowledge the Amendment to Articles of Incorporation embracing the foregoing resolution and to cause said Amendment to be filed and recorded as provided by law.

SIGNATURE PAGE FOLLOWS

IN WITNESS WHEREOF, the undersigned has executed this Written Action effective as of the date first set forth above.

SOLE SHAREHOLDER:

DEP BANCSHARES, INC.

By:

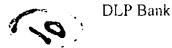
Robert/Peterson, Chief Financial Officer

## AMENDMENT TO ARTICLES OF INCORPORATION OF COMMUNITY STATE BANK

The undersigned, officers of Community State Bank, a Florida state bank with its principal office located in Starke, Florida (the "Bank"), do hereby certify that, pursuant to section 607.1006, Florida Statutes, on October 25, 2023 the Board of Directors approved and recommended to the sole shareholder an amendment to Article I of the Articles of Incorporation. On October 25, 2023, the sole shareholder and owner of all of the issued and outstanding shares of common stock of the Bank, approved a change in the Bank's name to DLP Bank and amended Article I of the Articles of Incorporation to read as follows:

#### **ARTICLE I**

The name of the Corporation shall be:



The Bank's initial place of business shall continue to be 811 South Walnut Street, in the City of Starke, in the County of Bradford, and in the State of Florida, 32091.

This Amendment shall be effective as of November 13, 2023.

Name: Thomas J. Fontaine

Title: Chief Executive Officer

Name: Carolyn Reddish

Title: Cashier

STATE OF FLORIDA

COUNTY OF BRADFORD )

The foregoing instrument was acknowledged before me this 25 day of October, 2023 by Thomas J. Fontaine the Chief Executive Officer, and Carolyn Reddish, the Cashier of Community State Bank, a banking corporation of the State of Florida, on behalf of the corporation and who are personally known to me.

Notary Public, State of Florida at Large My commission expires: 9/21/24

