

444593

Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. no return address
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

FILED
98 DEC 22 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

500002692475--8
-11/20/98-01025-003
*****35.00 *****35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Certificate of Surrender

12-23-98

Examiner's Initials

LFT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

November 30, 1998

TRANSFLORIDA BANK
1489 WEST PALMETTO PARK ROAD
SUITE 300
BOCA RATON, FL 33486

SUBJECT: TRANSFLORIDA BANK
Ref. Number: 444593

We have received your document for TRANSFLORIDA BANK and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 198A00056771



December 21, 1998

Carol Mustain
Corporate Specialist
Division of Corporations
409 East Gaines Street
Tallahassee, Fl 32399-0350

Dear Ms. Mustain

Enclosed is the revised Certificate of Surrender of State Charter for Transflorida Bank together with your letter dated November 30, 1998.

If you have any question, please do not hesitate to call me at (305)- 536-1724.

Sincerely,

A handwritten signature in cursive script, appearing to read "Luba Milbauer".

Luba Milbauer
Senior Vice President
Compliance and CRA Officer



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

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98 DEC 22 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Surrender of State Charter

This is to certify that Transflorida Bank,
Corporate Name

760, located at
Corporate Document Number

1489 West Palmetto Park Road, Suite 300
Street Address

Boca Raton, FL 33486

City and State

has completed the ☒ Merger ☐ Conversion of said corporation to or into a

National/Federal institution under the name of Union Planters Bank, National Association

, effective August 31, 1998,

and does hereby surrender its charter as a state chartered institution and Florida corporation.

This certificate is signed by an authorized officer this 21st day of December

, 19 98

Union Planters Bank, N.A.

Institution Name

Luba Milbauer, Senior Vice President

Authorized Officer

FILING FEE: \$35