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FOREIGN PROFIT/NONPROFIT CORPORATION

Ambank Services, Inc.

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May 30, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: AMBANK SERVICES, INC.
REF: W06000024643

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Written approval and clearance of the terms BANK, BANKER, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION or words of similar import, must be obtained from the Office of Financial Institutions, pursuant to section 655.922(2a), Florida Statutes.

If you have any further questions concerning your document, please call (850) 245-6972.

Doris Brown
Document Specialist
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P.O BOX 6327 - Tallahassee, Florida 32314

FROM : AMBANK SERVICES, INC.

PHONE NO. : 601 353 3376

Jun. 08 2006 12:35PM P2

OFFICE OF FINANCIAL REGULATION

CORPORATE NAME APPROVAL REQUEST

Pursuant to Section 855.922, Florida Statutes, no person other than a financial institution shall in this state transact business under any name or title that contains the words "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.

A proposed corporate name should be definitive enough to differentiate the business to be conducted from that of a commercial bank, trust company, savings and loan association, savings bank, or credit union. For example, a mortgage-related business should use the word "mortgage" in its corporate name.

In order for OFR to consider your request for approval to use "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 your corporate title, and issue a no objection letter, please provide the following information:

- The corporate name proposed is: Ambank Services, Inc.
- The alternate name (if necessary) is: N/A
- The nature of the business to be transacted:
Sales and service of banking equipment, including vault doors, safes, remote teller systems, ATM's, and alarm and surveillance systems.
- The proposed business will be located at:

<u>802 Foley Street, Jackson, MS 39202</u>	<u>601-353-8409</u>
Street Address	City State Zip Code Telephone
- List the principals involved in the proposed company:

<u>William Q. Manning</u>	<u>John E. Ward</u>
<u>R. Mark Watkins</u>	<u>James H. Tipton</u>

Contact Person:	Name	Address	Telephone
	R. Mark Watkins or Ruth Gressett	802 Foley St. Jackson, MS 39202	601-353-8409

Return to:

Director, Division of Financial Institutions
Office of Financial Regulation
200 East Gaines Street
Tallahassee, Florida 32399-0371
(850) 410-0800 (850) 410-8348 (fax)

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. Ambank Service, Inc.
(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. Mississippi 3. 64-0761091
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. June 6, 1988 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "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. 802 Foley Street Jackson, Mississippi 39202
(Principal office address)
- same
(Current mailing address)

8. sales and service of banking equipment
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

10. 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.

CT Corporation System

By: [Signature]
(Registered agent's signature)

11. 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.


12. Names and business addresses of officers and/or directors:

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TALLAHASSEE, FLORIDA

A. DIRECTORSChairman: R. Mark WatkinsAddress: 3045 Tidewater Circle, Madison, MS 39110Vice Chairman: William Q. ManningAddress: 304 Lakeside Drive, Brandon, MS 39042Director: John E. WardAddress: 1439 N. McRaven Drive, Clinton, MS 39056Director: James H. TiptonAddress: 119 Lakeview Drive, Madison, MS 39110**B. OFFICERS**President: William Q. ManningAddress: 304 Lakeside Drive, Brandon, MS 39047Vice President: John E WardAddress: 1439 N. McRaven Drive, Clinton, MS 39110Secretary: R. Mark WatkinsAddress: 3045 Tidewater Circle, Madison, MS 39110Treasurer: R. Mark WatkinsAddress: 3045 Tidewater Circle, Madison, MS 39110

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. William Q. Manning, President
(Typed or printed name and capacity of person signing application)

State of Mississippi

Office of the Secretary of State

Eric Clark, Secretary of State
Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on June 6, 1988, the State of Mississippi issued a Charter/Certificate of Authority to:

AMBANK SERVICES, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand
and seal of office
May 18, 2006

Eric Clark

ERIC CLARK
Secretary of State