

F070000002162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

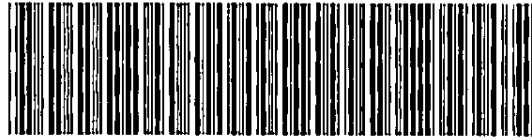
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: FAB Iowa, Inc. (f/k/a First American Bank)

Name of Corporation

DOCUMENT NUMBER: F07000002162

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

George Knott

Name of Contact Person

Knott, Ebelini, Hart

Firm/Company

1625 Hendry Street, Third Floor

Address

Ft. Myers, FL 33902

City/State and Zip Code

gknott@knott-law.com

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

For further information concerning this matter, please call:

George Knott

at (239) 334-2722

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F07000002162

(Document number of corporation (if known))

1. First American Bank
(Name of corporation as it appears on the records of the Department of State)
2. Iowa 3. 02/06/2007
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? March 13, 2020
5. FAB Iowa, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

N/A

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

N/A

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent N/A

(Florida street address)

New Registered Office Address: N/A, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

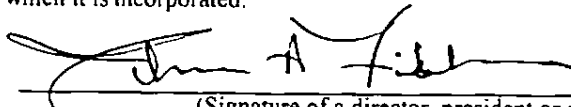
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.


CEO/President
 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

John A. Fisher

CEO/President

(Typed or printed name of person signing)

(Title of person signing)

FILING FEE \$35.00

IOWA

SECRETARY OF STATE CERTIFICATE OF EXISTENCE

Issue Date: 8/20/2020

Name: FAB IOWA, INC. (490 DP - 84857)

Date of Incorporation: 7/14/1982

Duration: PERPETUAL

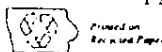
I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. Articles of dissolution have not been filed.
- e. Other facts of record requested by applicant will be on an attachment.



A handwritten signature in cursive script that reads "Paul D. Pate".

PAUL D. PATE SECRETARY OF STATE



Page 2
Issue Date: 8/20/2020

IOWA

SECRETARY OF STATE

Name: FAB IOWA, INC. (490 DP - 84857)

e. I further certify that according to the records filed with the Secretary of State's office the above named entity filed Articles of Intent to the articles of incorporation on 03/12/2020, changing FIRST AMERICAN BANK, Fort Dodge, Iowa, an Iowa banking corporation under Iowa Code 524.1309 to become an Iowa profit corporation subject to the provisions of Iowa Code 490 and changing the name to FAB IOWA, INC.



PAUL D. PATE SECRETARY OF STATE

