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(City/State/Zip/Phone #)		
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OFFICE OF FINANCIAL REGULATION

FINANCIAL SERVICES
COMMISSION

CHARLIE CRIST GOVERNOR

BILL MCCOLLUM ATTORNEY GENERAL

ALEX SINK
CHIEF FINANCIAL OFFICER

CHARLES BRONSON COMMISSIONER OF AGRICULTURE

2001 DEC -7 P 3: 48
SECRETARY OF STATE

November 30, 2007

Sheilah R. Mullen Legal Assistant Smith Welch & Brittain 280 Country Club Drive, Suite 200 Stockbridge, GA 30281

Re: High Trust Bank

Dear Ms. Mullen:

DON B. SAXON

COMMISSIONER

Reference is made to your recent letter/fax requesting approval of the above-referenced name (formerly Southern Horizon Bank) which is a state-chartered financial institution located in Stockbridge, Georgia.

As 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, the Office will not object to the use of the above name being registered to transact business in the state of Florida. This does not authorize the institution to engage in banking, trust or insurance business in the state of Florida. Proper regulatory approvals will be required.

Sincerely,

Linda B. Charity Director

LBC:bk

cc: Karon Beyer, Chief, Bureau of Commercial Recordings, Division of Corporations, Department of State

COVER LETTER

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TO: New Filing Section	Fig. D C
Division of Corporations	بن بن ج
·	955 F
SUBJECT: HIGH TRUST BANK	500
(Name of corporation - must include suffix)	<i>Y</i>
Dear Sir or Madam:	
Dear Sir of Iviadam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Busine "Certificate of Existence," and check are submitted to register the above referenced fore transact business in Florida.	ess in Florida," eign corporation to
Please return all correspondence concerning this matter to the following:	
SHEILAH R. MULLEN	
(Name of Person)	
SMITH, WELCH & BRITTAIN	
(Firm/Company)	
280 COUNTRY CLUB DRIVE, SUITE 200	
(Address)	
STOCKBRIDGE, GEORGIA 30281	
(City/State and Zip code)	
(Only/build and Zip bode)	
For further information concerning this matter, please call:	
SHEILAH R. MULLEN at (678) 289-2722	
(Name of Person) (Area Code & Daytime Telephone Nun	nber)
STREET/COURIER ADDRESS: New Filing Section New Filing Section	
Division of Corporations Division of Corporations	
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314	
Tallahassee, FL 32301	*
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Co	7.50 Filing Fee, ertificate of Status & ertified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
1. HIGH TRUST BANK 空前 号 二	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Finc.," "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. GEORGIA 3 580958-284	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. DECEMBER 30, 1965 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)	
7280 COUNTRY CLUB DR., SUITE 100, STOCKBRIDGE, GEORGIA 30281	
(Principal office address)	
SAME AS ABOVE	
(Current mailing address)	
8. MORTGAGE LENDER IN REAL ESTATE TRANSACTIONS	
(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: CHARLES B. BLACKMON	
Office Address: 1728 DUNES CLUB PLACE	
AMELIA ISLAND , Florida 30234	
(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 dutie and I am familiar with and accept the obligations of my position as registered agent.	r 2 S ,

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 director	s:
A. DIRECTORS	
Chairman:	
Address:	A.F.
	Má P D
Vice Chairman:	Est in
Address:	निति 🕉
Director:	
Address:	
Director:	
Address:	
President: CHARLES B. BLACKMON	
Address: 280 COUNTRY CLUB DR., SUITE 100	STOCKBRIDGE, GEORGIA, 30281
Address:	, , , , , , , , , , , , , , , , , , , ,
Vice President:	
Address:	
Secretary: DARBY A. MOTES	
occidity.	
Address:	
reasurer:	
Address:	·
NOTE: If necessary, you may such an addendum to the ap	oplication listing additional officers and/or directors.
Chile B. Ble	.F
(Signature of Director or Officer lister	d in number 12 of the application)
14 CHARLES B. BLACKMON	

(Typed or printed name and capacity of person signing application)

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

SMITH WELCH & BRITTAIN LLP SHEILAH R. MULLEN 280 COUNTRY CLUB DR SUITE 200 STOCKBRIDGE GA 30281 DOCKET NUMBER : 071121100 CONTROL NUMBER : J716116 DATE INC/AUTH/FILED: 12/30/1965 JURISDICTION : GEORGIA PRINT DATE : 11/21/2007

FORM NUMBER : 211

SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

I, Karen C Handel, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

HIGH TRUST BANK DOMESTIC BANK

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official

Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Karen C Handel Secretary of State

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