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Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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FOREIGN PROFIT/NONPROFIT CORPORATION

Sunshine Financial, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$78.75

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DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAR 23 2011

3/21/2

**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. Sunshine Financial, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co." or "Corp.")

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

2. Maryland

(State or country under the law of which it is incorporated)

3. 36-4678532

(FBI number, if applicable)

4. September 8, 2010

(Date of incorporation)

5. Perpetual

(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. 1400 East Park Avenue, Tallahassee, Florida 32301

(Principal office address)

1400 East Park Avenue, Tallahassee, Florida 32301

(Current mailing address)

8. To act as a holding company for Sunshine Savings Bank

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(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.

C T Corporation System

Judith Argao
Vice President
and Assistant Secretary

By: _____

(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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: John W. Madden, Chairman

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

Vice Chairman: _____

Address: _____

Director: Brian P. Baggett, Director, Executive Vice President

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

Director: Benjamin F. Butts, Jr., Director

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

B. OFFICERS

President: Louis O. Davis, Jr., President and Chief Executive Officer

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

Vice President: _____

Address: _____

Secretary: Brian P. Baggett, Executive Vice President, Chief Operating Officer and Secretary

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

Treasurer: Scott A. Swain, Senior Vice President, Chief Financial Officer and Treasurer

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

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

13. Brian P. Baggett

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

14. BRIAN P. BAGGETT, Director + EUP/COO

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

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TALLAHASSEE, FLORIDA

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A. Directors (Continued)

Director: Louis O. Davis, Jr., President, Chief Executive Office and Director

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

Director: Jack P. Dodd, Director

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

Director: Patrick E. Lyons, Director

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

Director: Doris K. Richter, Director

Address: 1400 East Park Avenue, Tallahassee, Florida 32301

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TALLAHASSEE, FLORIDA

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STATE OF MARYLAND
Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT SUNSHINE FINANCIAL, INC., INCORPORATED SEPTEMBER 08, 2010, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MARCH 21, 2011.

Paul B. Anderson

Paul B. Anderson
Charter Division



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TALBOT COUNTY, MD
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