Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000233071 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (850)222-1092 Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			
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#### FOREIGN PROFIT/NONPROFIT CORPORATION

Community & Southern Bank Corp.

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$70.00

\*RE-SUBMITATION FILLING

\*RE-SUBMITATION

Please retain-original filling

date of enhanceria. date of submission 9/23

9/23/2011

https://efile.sunbiz.org/scripts/efilcovr.exe

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM .

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Certificate of Status	0
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https://efile.sumbiz.org/scripts/efilcovr.exe

9/23/2011

: EKOKYJYJENO

NYWE : LIME : 03/53/5011 14:53

TRANSMISSION VERIFICATION REPORT

## COVER LETTER

TO: New Filing Section Division of Corporations		
	mmunity & Southern Bank	,
Name of corpo	oration - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation" Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by	d Standing" and check are sub-	et Business in Florida," mitted to register the
Please return all correspondence concerning this r	matter to the following:	•
Nan	ne of Person	
Firm	/Company	
	Address	•
City/S	tate and Zip code	
carol.langfor	rd@thecsbank.com	
E-mail address: (to be t	used for future annual report n	otification)
For further information concerning this matter, ple	ease call:	•
	,	•
Name of Person at (	) Area Code & Daytime Telepho	ne Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AI New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FI	etion rporations
Enclosed is a check for the following amount:		
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

September 26, 2011

FLORIDA DEPARTMENT OF STATE SUBMIT\*
Division of Corporations\* SUBJECT: COMMUNITY & SOUTHERN BANK CORP. Please reiginal filling REF: W11000049474

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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P06000076228. (COMMUNITY SOUTHERN BANK).

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 245-6962.

P.O BOX 6327 - Tallahassee, Florida 32314

Valerie Herring Regulatory Specialist II New Filing Section #: H11000233071
FLORIDA DEPARTMENT OF: SPATA 00022077
Division of Corporations



October 3, 2011

FLORIDA DEPARTMENT OF STATE Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: COMMUNITY & SOUTHERN BANK CORP.

REF: W11000049474

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.

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within  $60 \cdots s$  days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Jessica A Fason Regulatory Specialist II FAX Aud. #: H11000233071 Letter Number: 211A00022077

\*RE-SUBMIT\*
Please retain original filing date of submission 2/23

P.O BOX 6327 - Tallahassee, Florida 32314



October 4, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: COMMUNITY & SOUTHERN BANK (GA) CORP.

REF: W11000051128

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.

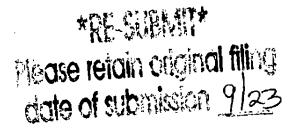
Please accept our apology for failing to mention this in our previous letter.

The alternate corporate name must have written approval and clearance from the Office of Financial Institutions.

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. Their telephone number should you need to contact them is 850-410-9800.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II FAX Aud. #: H11000233071 Letter Number: 811A00022805





TOM GRADY COMMISSIONER

STREET ADDRESS: 101 East Gaines Street, Suite 636 • PHONE (\$50) 410-9800 • FAX (\$50) 410-9548
MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallthassee, FL 32399-0371
Visit us on the web: <a href="https://www.tdures.com/">https://www.tdures.com/</a> Toll Free: (\$00) \$48-3792

September 29, 2011

Ms. Carol T. Langford Community and Southern Bank 3333 Riverwood Parkway, Suite 350 Atlanta, GA 30339

Re: Community & Southern Bank Corp.

Dear Ms. Langford:

Reference is made to your recent e-mail requesting approval of the above name, which is a Georgia state chartered bank located in Carrollton, 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 or any other licensed activity 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



TOM GRADY COMMISSIONER

STREET ADDRESS: 101 East Gaines Street, Suite 636 - PHONE (\$50) 410-9806 - FAX (\$50) 410-9548 MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallahassee, PL 32399-0371 Visit us on the web: WIYW PLOFR COM . Tell Free: (200) \$45-3792

October 6, 2011

Ms. Emily H. Lieberman 1201 Peachtree Street, N.E. Atlanta, GA 30361

Re: Community & Southern Bank (GA) Corp.

Dear Mr. Charleston:

Reference is made to your recent fax requesting approval of the above name, which is a Georgia state chartered bank located in Carrollton, 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 or any other licensed activity 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

11 SEP 23 PM 1: 02

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1 Community &	Southern Bank Corp.			•
(Enter name of	corporation; must include "INCORPORAT	ED,	" "COMPANY," "CORPORATIO	ON,"
"Inc.," "Co.," "	Corp," "Ino," "Co," or "Corp.")			
Community	& Southern Bank (GA) Corp.			•
(If name unava	lable in Florida, enter alternate corporate n	ame	adopted for the purpose of transact	ing business in Florida)
2. Georgia	•	2	27-1763887	•
	under the law of which it is incorporated)		(FEI number, if ap	plicable)
401/29/2010		. 5.	Perpetual	v vi ti ti fi mali i
	e of incorporation)	,	(Duration: Year corp. will couse t	lo exist or "perpetual").
6. Upon Qualifica	ation			
1	(Date first transacted busine	es in	Florida, if prior to registration)	
	(SÉE SECTIONS 903-1201 % 90	17,13	02, F.S., to determine penalty liabi	mži
7,201 Maple Stree	t, Carrollton, Georgia 30117			
•	(Principal office	HOOL	CRS)	• .
Fame	(Current mailing	نىسىنىن دادادە	era)	many decisions are also proper
	Chrom nand	Ecci	trus)	ing that a APP per in the control of
8. Banking				
(Purpose(	s) of corporation authorized in home state of	Dr CO	untry to be carried out in state of F	orida)
9. Name and stre	ct address of Florida registered agent: (	(P.O	. Box NOT scoeptable)	
Name:	C T Corporation System			
Office Address:	1200 South Pine Island Road			• •
	Plantation		Florida 33324	*
	(City)		(Zip oods)	•
10. Registered a	gent's acceptance:			
Having been nam	ed as registered agent and to accept se	ervic	e of process for the above state	d corporation at the place
designated in this	application, I hereby accept the appointments with the provisions of all statute	inim er re	ent as registered agent and agr lative to the proper and comple	ee to act in this capacity. I to norformance of my duties.
and I am familia	with and accept the obligations of my	pos	ition as registered agent.	
	C T Corporation System		Connie B Assistant Se	Sriinn
•	BY: Consi Bru	3/8	Description of	yan
	(Registered agent's signatu	<b>(</b> 6)	ye judgeleen	ecretaru
11 Attached to -	certificate of existence duly authenticat	/ ind :	•	
the Department of	State, by the Scoretary of State or othe	ofi	icial having custody of corporat	te records in the jurisdiction
under the law of v	which it is incorporated.		· · · · · · · · · · · · · · · · · · ·	1

PL019 - 03/03/2011 C T Pliling Manufac Girllini



11 SEP 23 PM 1: 02

12 Nam	ies and business addresses of officers and/or directors:
	ECTORS SEE ATTACHMENT
Chairman	; John W. Spiegel
Address:	3333 Riverwood Parkway, Suite 350
	Atlanta, GA 30339
Vice Chai	rman:
Director:	
2 2000 034.	
D:	
Address: _	
-	
B. OFFI	CERS SEE ATTACHMENT
President:	Lee M. Sessions Ir.
Address: _	3333 Riverwood Parkway, Suite 350
	Atlanta, GA 30339
	lent:
·	
Address: _	
Treasurer:	
Address: _	
NOTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.
3	ASS STE
	Signature of Director or Officer
re true and	or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein is that he or she is aware that false information submitted in a document to the Department of State constitutes a se felony as provided for in s.817.155, F.S.
4	Stephen R. Stone, General Counsel & Chief Administrative Officer
	(Typed or printed name and capacity of person signing application)

# Attachment to Florida Officers & Directors

1 Full Name: Patrick M. Frawley

Officer/Director: Officer, Director

Officer's Title: Chief Executive Officer

Director's Title: Director

Business Address: 3333 Riverwood Parkway, Suite 350

City: Atlanta
State: GA
ZIP Code: 30339

2 Full Name: Stephen R. Stone

Officer/Director: Officer

Officer's Title: General Counsel & Chief Administrative

Officer

Director's Title:

Business Address: 3333 Riverwood Parkway, Suite 350

City: Atlanta
State: GA
ZIP Code: 30339

3 Full Name: Anthony P. Valduga

Officer/Director: Officer

Officer's Title: Chief Financial Officer

Director's Title:

Business Address: 3333 Riverwood Parkway, Suite 350

City: Atlanta
State: GA
ZIP Code: 30339

4 Full Name: Ray G. Skinner

Officer/Director: Officer

Officer's Title: Chief Banking Officer

Director's Title:

Business Address: 3333 Riverwood Parkway, Suite 350

City: Atlanta
State: GA
ZIP Code: 30339

#### FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

## 11 SEP 23 PM 1: 02

5 Full Name: Stewart Brown

Officer/Director: Director

Officer's Title:

Director's Title: Director

Business Address: 3333 Riverwood Parkway, Suite 350

City: Atlanta
State: GA
ZIP Code: 30339

6 Full Name: Chris Casciato

Officer/Director: Director

Officer's Title:

Director's Title: Director

Business Address: 3333 Riverwood Parkway, Suite 350

City: Atlanta
State: GA
ZIP Code: 30339

7 Full Name: J. Joseph Edwards

Officer/Director: Director

Officer's Title:

Director's Title: Director

Business Address: 3333 Riverwood Parkway, Suite 350

City: Atlanta
State: GA
ZIP Code: 30339

8 Full Name: Michael McGovern

Officer/Director: Director

Officer's Title:

Director's Title: Director

Business Address: 3333 Riverwood Parkway, Suite 350

City: Atlanta
State: GA
ZIP Code: 30339

FILED SECRETARY OF STATE

Control Res 310847285

# STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

# CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

#### **COMMUNITY & SOUTHERN BANK**

#### Domestic Bank

was duly incorporated on 01/29/2010 in Georgia. Said corporation 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.

This certificate is issued under the authority of Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.

This certificate applies only to filings pursuant to Title 14 of the Official Code of Georgia Annotated. Information concerning bank related filings must be certified by the Georgia Department of banking and Finance.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 22nd day of September, 2011

B:Ph

Brian P. Kemp Secretary of State

Certification Number: 7743923-1 Reference: Verify this certificate enfine at http://corp.sos.state.ga.us/corp/soskb/verify.asp