F12000002245

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

W12-25559



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FLORIDA DEPARTMENT OF STATE AND SECRETARIAN Division of Corporations

May 8, 2012

SANDY MAMO 343 S. MAIN STREET SUITE 201 ANN ARBOR, MI 48104

SUBJECT: FIRST INDEPENDENCE BANK

Ref. Number: W12000025559

We have received your document for FIRST INDEPENDENCE BANK and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 608.502(4), F.S., this office is required to collects a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tihomas Chang Regulatory Specialist II New Filing Section

Letter Number: 712A00013795



LINDA B. CHARITY
INTERIM COMMISSIONER

STREET ADDRESS: 101 East Gaines Street, Suite 636 • PHONE (850) 410-9800 • FAX (850) 410-9548

MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallahassee, FL 32399-0371

Visit us on the web: www.itsyourmoneyflorida.com • 850-487-9687

May 18, 2012

Mr. Mark K. Rabidoux 343 S. Main Street, Suite 201 Ann Arbor, MI 48104

Re: First Independence Bank

Dear Mr. Rabidoux:

Reference is made to your recent letter requesting approval of the above name, which is a state chartered bank located in Detroit, Michigan.

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

MARK K. RABIDOUX, PLC

ATTORNEY AND COUNSELOR

343 South Main Street, Suite 201 Ann Arbor, Michigan 48104 Fax (734) 994-6134 www.mortgageattorney.net

Mark K. Rabidoux, Esq. Certified Mortgage Banker (248) 225-3920 rabidoux@sbcglobal.net

Sandra M. Mamo Legal Assistant (248) 225-3908 smmamo@sbcglobal.net

May 3, 2012

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

Dear Sir/Madam:

Please find enclosed an application for foreign corporation registration. Please note that this is a MI state chartered bank and, therefore, this is no designator (co., corp, etc). Being a bank, they can't add something like this. I contacted the Division and was asked to just note this with the filing.

Please contact me if you have any questions. Thank you.

Sincerely,

MARK K. RABIDOUX, PLC Professional Limited Liability Company

> Sandy Mamo Legal Assistant

Enclosure

COVER LETTER

TO:	New Filing Section Division of Corporations			
SUBJE	ECT: First Independence Bank			
	Name of corporation - mu	st include suffix		
Dear Si	Sir or Madam:			
"Certifi	iclosed "Application by Foreign Corporation for Authoricate of Existence," or "Certificate of Good Standing" referenced foreign corporation to transact business in	and check are subm		
Please 1	return all correspondence concerning this matter to the	e following:		
Sand	dy Mamo			
	Name of Perso	n		
Mark	k K. Rabidoux, PLC			
	Firm/Company			
343	S. Main Street, Suite 201			
	Address			
Ann A	Arbor, MI 48104			
	City/State and Zi	p code		
smma	amo@sbcglobal.net			
	E-mail address: (to be used for fur	ture annual report no	tification)	
For furt	rther information concerning this matter, please call:			
Sandy Mamo at (248) 225-3908				
Name of Person Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclose	sed is a check for the following amount:			
✓ \$7	- II	.75 Filing Fee & tified Copy	\$87.50 Filing Fee, Certificate of Status &	

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.

I First independence Bank			
(Enter name of corporation; must include "INCORPORATE "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"		
(If name unavailable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida)		
2. MI (State or country under the law of which it is incorporated)			
(State or country under the law of which it is incorporated)	(FEI number, if applicable)		
4. 11/07/2005	5. perpetual		
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
6. upon qualification			
6. upon qualification (Date first transacted busine) (SEE SECTIONS 607.1501 & 60	ess in Florida, if prior to registration) 17.1502, F.S., to determine penalty liability)		
7.44 Michigan Avenue, Detroit, MI 4822	6		
(Principal office	address)		
44 Michigan Avenue, Detroit, MI 48	226		
(Current mailing	address)		
8. mortgage lending activities			
(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: Business Filings Incorpora	Name: Business Filings Incorporated		
Office Address: 515 E. Park Aven Tallahassee	N.C.		
Tallahassee	, Florida <u>32301</u>		
(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.

Mary go Spolinger, Aset. Sec. For Business Filings Incorporated (Rogistered 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: A. DIRECTORS Chairman: Donald Davis Address: 44 Michigan Avenue Detroit, MI 48226 Vice Chairman: ____ Address: Director: Richard Zamojski Address: 44 Michigan Avenue Detroit, MI 48226 Director: Alan Young Address: 44 Michigan Avenue Detroit, MI 48226 **B. OFFICERS** President: Richard Zamojski Address: 44 Michigan Avenue Detroit, MI 48226 Vice President: Jeffery Sugg Address: 44 Michigan Avenue Detroit, MI 48226 Secretary: Jeffery Sugg Address: 44 Michigan Avenue, Detroit, MI 48226 Treasurer: Jeffery Sugg Address: 44 Michigan Avenue, Detroit, MI 48226 NOTE: If necessary, you play attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. Jeffery Sugg

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

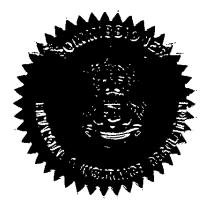
STATE OF MICHIGAN

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS OFFICE OF FINANCIAL AND INSURANCE REGULATION

I, R. Kevin Clinton, Commissioner of the Office of Financial and Insurance Regulation,
Department of Licensing and Regulatory Affairs, State of Michigan, do hereby certify the records
of this office reflect

First Independence Bank

is a Michigan banking corporation headquartered in the City of Detroit, County of Wayne, State of Michigan, United States of America, and is duly authorized to transact business under its charter, pursuant to the provisions of applicable statutes of this State.



SIGNED AND SEALED this 26th day of April, 2012, at Lansing, Michigan.

R. Kun Cuin

R. Kevin Clinton Commissioner