PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	REINSTATEMENT			DEPARTMENT OF STATE Secretary of State vision of corporations				FILED 16 FEB -2 PH 2:54				
DOCUMENT # F13000005356 1. Corporation Name							SELMETARE LE CIATE TALLAHASSEE, PLORIDA					
Fidelit	ty Bank-Formerly Fide	lity Home	estead	Sav	ings	Bank						
223 W			Office Address									
			Vest Gregory Street				CR2E081 (11/10)					
Suite, Apt #, etc. Suite, Apt #,			, etc.				Date Incorporated or Qualified					
City & State City & State								siness in	Flonda			
Pensa			acola			1 1				Applied For Not Applica		
Zip	Zip Country		12		Country		16					
	7. Name and Address of	of Current Regis	tered Ager	it								
Balenc	la Hetzel											
Street Add	ress (P.O. Box Number is Not Acceptable	e)		•								
223 West Gregory Street Suite, Apt #, Etc							5	002	28170	JBOE		
City				State		Code	02/0	2/16-	-01016	-018 *	÷900.00	
Pensacola				FL	3250							
8. I, being	appointed the registered agent of the ab	ove named corpo	ration, am	amiliar v	vith and a	ccept the o	bligations of sect	ion 607.0	505 or 617.050	03, F.S.		_
Signature of Registered Agent REGISTERED AG				BENT MUST SIGN				Date				
9. Names	and Street Addresses of Each Officer an	nd/or Director (Fig	orida nonpro	ofit corpo	rations m	ust list at le	ast 3 directors)					
Tittes	Name of Officers and/or Directors	Street Address of Each Officer and/or Director				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City / State / Zip					
CEO, President	Alton K. McR	201 St.	Charle	s Ave.	, 27th FI	, STE. 2710	Nev	v Orlear	ns, LA	70170 U	ıs	
EXVP	Patrick Grigg	201 St.	Charle	s Ave.	, 27th FI	, STE. 2710	Nev	v Orlear	ns, LA	70170 U	IS	
D	Katherine A. Cr	201 St.	Charle	s Ave.	, 27th Fl	, STE. 2710	Nev	v Orlear	is, LA	70170 U	IS	
D	Luis J. Banos,	201 St.	Charle	s Ave.	27th Fl	STE. 2710	Nev	v Orlear	ns, LA	70170 U	ıs	
D	Stephen W. Hales			Charle	s Ave.	27th FI	STE. 2710	New	/ Orlear	is, LA	70170 U	S
0	Charles LeFevre			Charle	s Ave.,	27th FI	STE. 2710	New	/ Orlear	is, LA	70170 U	S
^{0.} E-mai	I Address: deana.veal@fidelityhon	nestead.com	/T- 1			and topod				FEB	2 2015	_

(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when fine the reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617,040 M.S. Whomballe fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in 5 817 155, F.S.

> Charles LeFevre SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

January 26, 2016 504-569-8384

Daytime Phone #