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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

DEC -6 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: First Bank and Trust

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Charles L. Blackwell, III

Name of Person

First Bank and Trust

Firm/Company

909 Poydras Street Suite 1700

Address

New Orleans, LA 70112

City/State and Zip code

lbarker@fbtonline.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Blackwell

504

584-5921

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**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. First Bank and Trust

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "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. Louisiana 3. 72-1189233

(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. May 20, 1991 5. _____

(Date of incorporation) (Date of duration, if other than 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. 909 Poydras Street Suite 1700, New Orleans LA 70112

(Principal office address)
- _____
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Kristen Blossman

Office Address: 495 Grand Blvd., Suite 270

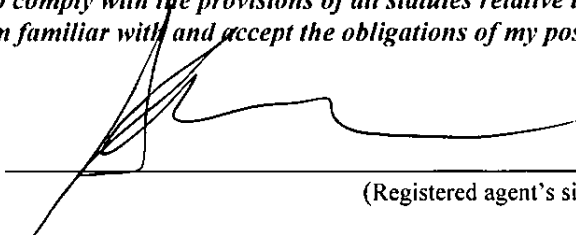
Miramar Beach, Florida 32550

(City) (Zip code)

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9. 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.



(Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: See Attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Lisa Hinkel, Vice President, Corporate Secretary

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

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First Bank & Trust Board of Directors

Boysie Bollinger	Chairman of the Board
David Guidry	Vice Chairman of the Board
Joe Canizaro	Director
Fred Blossman	Director
Gary Blossman	Director and President and CEO
Ralph Cox	Director
Patricia Denechaud	Director
Randy Howard	Director
Mark Jeansonne	Director
Ryan Lopiccolo	Director

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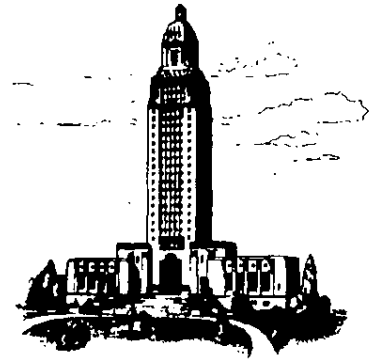
First Bank & Trust Officers

Gary Blossman	President & CEO
Brandon Faciane	EVP, Chief Credit Officer
Duane Abadie	EVP, Chief Banking Officer
Charles Blackwell	SVP, Chief Risk Officer
Leigh Barker	SVP, Chief Accounting Officer
Lisa Hinkel	VP, Corporate Secretary

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STATE OF LOUISIANA
OFFICE OF FINANCIAL INSTITUTIONS
BATON ROUGE, LOUISIANA



IT IS HEREBY CERTIFIED THAT

FIRST BANK AND TRUST,

domiciled in New Orleans, Orleans Parish, Louisiana,

was issued a Certificate of Authority

to conduct the business of banking under

the laws of the State of Louisiana, effective May 20, 1991,

and that

FIRST BANK AND TRUST,

domiciled in New Orleans, Orleans Parish, Louisiana,

is currently operating pursuant to said Certificate.

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TALLAHASSEE, FLORIDA



In testimony whereof, I have hereunto set
my hand and caused the seal of my Office
to be affixed at the City of Baton Rouge on
October 4, 2016.

John Ducrest

John Ducrest, CPA
Commissioner of Financial Institutions