

F17000004094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

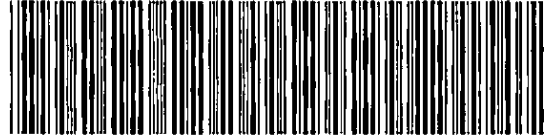
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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CALIFORNIA


2017 SEP 13 PM 1:47
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CALIFORNIA

K. SALY
SEP 14 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 780737 8148984

AUTHORIZATION : 

COST LIMIT : \$ 70.00

ORDER DATE : August 23, 2017

ORDER TIME : 1:21 PM

ORDER NO. : 780737-001

CUSTOMER NO: 8148984

FOREIGN FILINGS

NAME: CITIZENS BANK

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____



FLORIDA OFFICE OF FINANCIAL REGULATION

www.FLOFR.com

DREW J. BREAKSPEAR
COMMISSIONER

September 1, 2017

2017 SEP 13 AM 10:58
FILED
DIVISION OF FINANCIAL INSTITUTIONS
TALLAHASSEE, FLORIDA

Ms. Holly Erickson
Citizens Bank
24 W. Main Street
Mooresville, IN 46158

Re: Citizens Bank.

Dear Ms. Erickson:

Reference is made to your recent letter requesting approval to register the above-referenced fictitious name with the Florida Secretary of State by Citizens Bank, which is an Indiana state-chartered bank located in Mooresville, Indiana.

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. Therefore, this Office will not object to the use of the above referenced name being registered to transact business in the state of Florida. However, this correspondence is not intended to grant the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

A handwritten signature in black ink, appearing to read "JWS", is written over the typed name "Jeremy W. Smith".

Jeremy W. Smith
Director
Division of Financial Institutions

JWS:dlb

cc: Lyn Shoffstall, Chief, Bureau of Commercial Recordings, Division of Corporations,
Department of State

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Citizens Bank

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:

Keith A. Lindauer

Name of Person

Citizens Bank

Firm/Company

33 N. Indiana Street

Address

Mooreville, IN, US, 46158

City/State and Zip code

klindauer@citizens-banking.com

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

For further information concerning this matter, please call:

Holly Erickson

at (317) 831-9667

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

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

Citizens Bank Corp.

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

2. Indiana 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03-05-1982 5. Perpetual
(Date of incorporation) (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. 33 N. Indiana Street, Mooresville, IN, US, 46158
(Principal office address)

33 N. Indiana Street, Mooresville, IN, US, 46158
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

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.

Corporation Service Company

By: _____

(Registered agent's signature)

Melissa Zender
Asst. Vice President

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.

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JACKSONVILLE, FLORIDA

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

A. DIRECTORS

Chairman: Larry A. Heydon

Address: P.O. Box 789
Mooresville, IN 46158

Vice Chairman: Thomas A. Hubbard

Address: P.O. Box 789
Mooresville, IN 46158

Director: William R. Keller

Address: P.O. Box 789
Mooresville, IN 46158

Director: Keith A. Lindauer

Address: P.O. Box 789
Mooresville, IN 46158

B. OFFICERS

President: Keith A. Lindauer

Address: 33 N. Indiana Street
Mooresville, IN 46158

Vice President: SVP -- John L. Purdie

Address: 33 N. Indiana Street
Mooresville, IN 46158

Secretary: N/A

Address: _____

Treasurer: N/A

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 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.

13. Keith A. Lindauer

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

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ALBANY, NY

ADDITIONAL DIRECTORS:

Jennifer A. Andres
P.O. Box 789
Mooresville, IN 46158

Jeffrey A. Banning
P.O. Box 789
Mooresville, IN 46158

Christopher J. Branson
P.O. Box 789
Mooresville, IN 46158

Calvin A. Persohn
P.O. Box 789
Mooresville, IN 46158

John P. Wilkowski
P.O. Box 789
Mooresville, IN 46158

ADDITIONAL OFFICERS:

SVP – John E. Fleener
33 N. Indiana Street
Mooresville, IN 46158

SVP – Mark A. Lemieux
33 N. Indiana Street
Mooresville, IN 46158

SVP – Cory R. Palmer
33 N. Indiana Street
Mooresville, IN 46158

SVP – Michael S. Polley
33 N. Indiana Street
Mooresville, IN 46158

SVP – Pennie M. Stancombe
33 N. Indiana Street
Mooresville, IN 46158

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FALLAHOUSE, FLORIDA

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

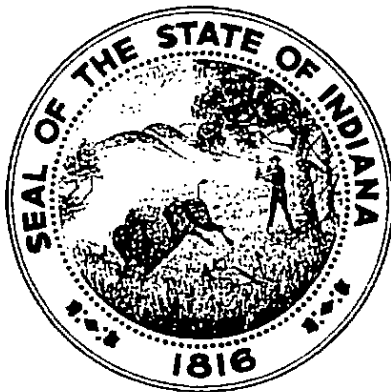
I further certify that records of this office disclose that

CITIZENS BANK

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HALL INDIANAPOLIS

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on March 05, 1982, and was in existence or authorized to transact business in the State of Indiana on August 10, 2017.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, August 10, 2017

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

198203-156 / 2017378311

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>