

5/10/2018

F18000002232

2018-05-10 08:59:21 EST

18-420808-5 From: Ranae McGraw

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6393

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

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

Email Address: \_\_\_\_\_

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FL 32399-0001

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32399-0001

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**FIRST SAVINGS BANK, Inc.**

Certificate of Status	0
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Page Count	05
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MAY 11 2018

# 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 SAVINGS BANK, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Indiana 3. 35-0309754  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12/19/2014 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. Upon Filing  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 501 E LEWIS & CLARK PKWY, CLARKSVILLE, IN 47129  
(Principal office address)
- \_\_\_\_\_  
(Current mailing address, if different)

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

Name: C T Corporation System


Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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.*

C T Corporation System

By:  Ryan Underwood, Assistant Secretary  
(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: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: Maury YoungAddress: 501 E LEWIS & CLARK PKWY, CLARKSVILLE, IN 47129

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. Maury Young, Vice President

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

**State of Indiana  
Office of the Secretary of State**

**CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greeting:

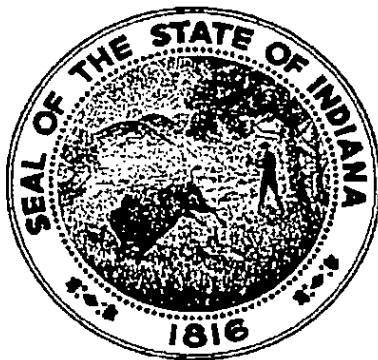
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

**FIRST SAVINGS BANK**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 19, 2014, and was in existence or authorized to transact business in the State of Indiana on May 10, 2018.

I further certify this Domestic Financial Institution 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. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, May 10, 2018

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

2014123000582 / 2018613958

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on June 09, 2018.



## FLORIDA OFFICE OF FINANCIAL REGULATION

[www.FLOFR.com](http://www.FLOFR.com)

DREW J. BREAKSPEAR  
COMMISSIONER

April 5, 2018

Ms. Jackie Journell  
Chief Accounting Officer  
First Savings Bank  
501 East Lewis & Clark Parkway  
Clarksville, Indiana 47129

Re: First Savings Bank

Dear Ms. Journell:

Reference is made to your recent letter requesting approval to register the above-referenced fictitious name with the Florida Secretary of State by First Savings Bank, which is a FDIC regulated state chartered bank located in Clarksville, 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 "Jeremy W. Smith".

Jeremy W. Smith  
Director  
Division of Financial Institutions

JWS:jj

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



# FLORIDA OFFICE OF FINANCIAL REGULATION

www.FLOFR.com

**F18060002232**

DREW J. BREAKSPEAR  
COMMISSIONER

April 20, 2018

Ms. Jackie Journell  
Chief Accounting Officer  
First Savings Bank  
501 East Lewis & Clark Parkway  
Clarksville, Indiana 47129

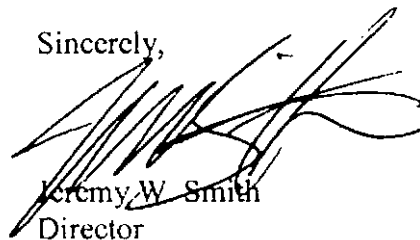
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Sincerely,



Jeremy W. Smith  
Director

Division of Financial Institutions

MAY 17 2018

T SCHROEDER

JWS:jjr

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