

F20000001384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

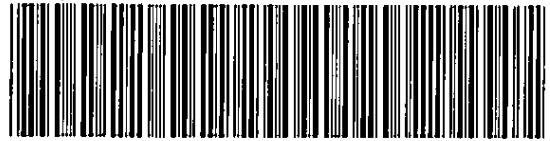
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W20000016729

Office Use Only



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2020 MAR 12 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JS

✓



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 18, 2020

STEPHANIE HARRIS
5 MARKET ST.
AMESBURY, MA 01913

SUBJECT: THE PROVIDENT BANK
Ref. Number: W20000016729

We have received your document for THE PROVIDENT BANK and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return 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) 245-6051.

Yvette Scott
Document Specialist II

Letter Number: 220A00003568

RECEIVED

MAR 12 2020

FLORIDA OFFICE OF
FINANCIAL  REGULATION

www.flofr.com

December 23, 2019

Ms. Angelina Milano
The Provident Bank
5 Market Street
P.O. Box 37
Amesbury, MA 01913

Re: The Provident Bank

Dear Ms. Milano:

Reference is made to your recent letter requesting approval to register the above-referenced name with the Florida Secretary of State by The Provident Bank, an FDIC regulated bank located in Amesbury, Massachusetts.

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,



Jeremy W. Smith
Director
Division of Financial Institutions

JWS/trd

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Provident 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:

Stephanie Harris

Name of Person

The Provident Bank

Firm/Company

5 Market St

Address

Amesbury, MA 01913

City/State and Zip code

sharris@theprovidentbank.com

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

For further information concerning this matter, please call:

Stephanie Harris

at (978) 834-8520

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

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2006 FEB 12 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. The Provident Bank
(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. MA 3. 04-3497377
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 20, 1828 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. January 21, 2020
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5 Market St, Amesbury, MA 01913
(Principal office street address)

(Current mailing address, if different)

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

Name: The Provident Bank

Office Address: 816 N A1A Highway Suite 202

Ponte Vedra Beach, Florida 32082
(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.



(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

☐ Chairman Name: Frank G Cousins
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Charles Cullen
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____


☐ Chairman Name: James Deleo
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Lisa Destefano
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Jay Gould
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Nathaniel Gravel
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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. Stephanie Harris - Officer
 (Typed or printed name and capacity of person signing application)

A. DIRECTORS

☐ Chairman Name: Laurie H Knapp
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Barbara Piette
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Arthur Sullivan
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Richard L. Peeke
☐ Vice Chairman Address: 5 Market St
☒ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☒ Chairman Name: Joseph B Reilly
☐ Vice Chairman Address: 5 Market St
☐ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Charles F Withee
☐ Vice Chairman Address: 5 Market St
☐ Director Amesbury, MA 01913
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

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12. [Signature]
Signature of Director or Officer

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13. Stephanie Harris - Officer
(Typed or printed name and capacity of person signing application)

A. DIRECTORS

☐ Chairman Name: Anne Lapointe
☐ Vice Chairman Address: 5 Market St
☐ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Executive Officer ☐ Other _____

☐ Chairman Name: Carol Houle
☐ Vice Chairman Address: 5 Market St
☐ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other CFO ☐ Other _____

☐ Chairman Name: Kim Scholtz
☐ Vice Chairman Address: 5 Market St
☐ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Stephanie Harris
☐ Vice Chairman Address: 5 Market St
☐ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Officer ☐ Other _____

☐ Chairman Name: David P Mansfield
☐ Vice Chairman Address: 5 Market St
☐ Director Amesbury, MA 01913
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other CEO ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. [Signature]
 Signature of Director or Officer

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13. Stephanie Harris - Officer
 (Typed or printed name and capacity of person signing application)



COMMONWEALTH OF MASSACHUSETTS
Office of Consumer Affairs and Business Regulation
DIVISION OF BANKS

1000 Washington Street, 10TH Floor, Boston, MA 02118-6400
(617) 956-1500 · Fax (617) 956-1599 · TDD (617) 956-1577
www.Mass.Gov/DOB

CHARLES D. BAKER
GOVERNOR

KARYN E. POLITO
LIEUTENANT GOVERNOR

MIKE KENNEALY
SECRETARY OF HOUSING AND
ECONOMIC DEVELOPMENT

EDWARD A. PALLESCHI
UNDERSECRETARY

MARY L. GALLAGHER
COMMISSIONER

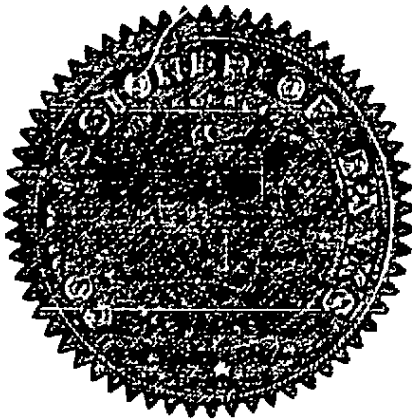
January 16, 2020

To Whom It May Concern:

This letter is to certify that records currently in the possession of the Division of Banks indicate that The Provident Institution for Savings in the Towns of Salisbury and Amesbury, Amesbury, Massachusetts was incorporated on February 20, 1828. On January 9, 1998, the name of the Bank was changed to The Provident Bank. Effective January 14, 2000, The Provident Bank reorganized into a mutual holding company structure under the name of Provident Bancorp, with The Provident Bank as a subsidiary banking institution in stock form. A mid-tier holding company, Provident Bancorp, Inc., was formed on August 25, 2011. Provident Bancorp, Inc. issued a minority share of its stock on July 21, 2015. Provident Bancorp converted from a mutual holding company to a stock holding company effective October 16, 2019. The Provident Bank continues to operate as a state-chartered stock savings bank under the provisions of Massachusetts General Laws chapter 168 and other related statutes, subject to supervision and examination by the Commissioner of Banks.

Sincerely,

Brenda L. Miller
Counsel



FILED
2020 MAR 12 PM 3:13
SECRETARY OF HOUSING AND
ECONOMIC DEVELOPMENT
TALLAHASSEE, FLORIDA