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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC:

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email Address:____

REGISTERED AGENT CHANGE PREMIER BANK

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		17.0502, 607.1508, or 617.1508, Florida Statutes, this
		organized under the laws of the State of Ohio registered agent, or both, in the State of Florida.
1. The name of	the corporation: Premier Bank	
2. The principal office address: 275 WEST FEDERAL STREET YOUNGSTOWN, OH 44503		
3. The mailing a	address (if different):	
4. Date of incorporation/qualification: 05/12/2021 Document number: F21000002700		
5. The name and Florida Depar	d street address of the current regist rtment of State: (If resigned, enter r	ered agent and registered office on file with the esigned)
	C T CORPORATION SYSTEM	
	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION, FL 33324	
6. The name and (if changed):	d street address of the new registere	d agent (if changed) and /or registered office
	Corporate Creations Network Inc.	1021
	801 US Highway 1	P.O. Box NOT acceptable P.O. Box NOT acceptable SSC
		P.O. Box NOT acceptable
	North Palm Beach, FL 33408	Sign A
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered agent.
Such change wa authorized by th	as authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by an officer so en notified in writing of the change.
Lun		Lauren Underwood, Special Secretary
•	re of an officer or director	Printed or typed name and little
of my duties, an document is bei	O COMBIV WIM THE DEDVISIONS OF A	ent and agree to act in this capacity. It statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the ange.
Lun		08/26/2021
Sign	nature of Registered Agent	Date
If signing on be	half of an entity:	
Lauren Underwo	od, Attorney-in-Fact	
Ty	rped or Printed Name	

* * * FILING FEE: \$35.00 * * *