

F21000006385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

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☐

MAIL

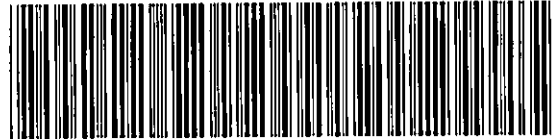
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
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S. HAWKES  
NOV - 2021



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: I200000000088

Date: 11/04/2021

Name: Chris Vick

Reference #: 1519253

Entity Name: BELMONT BANK & TRUST COMPANY

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFIED COPY UPON FILING

Authorized Amount: \$78.75

Signature: [Signature]

• CORPORATE HQ  
COGENCY GLOBAL INC.  
10 E 40TH ST, 10TH FL  
NY, NY 10016  
D: +1.212.947.7200  
P: 800.221.0102  
F: 800.944.6607

• EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES,  
REGISTRY #310372  
6 LLOYDS AVE, UNIT 4CL  
LONDON EC3N 3AY  
+44 (0)20.3961.3080

• ASIA PACIFIC HQ  
COGENCY GLOBAL (HK) LIMITED  
A HONG KONG LIMITED COMPANY  
UNIT B, 1/F, LIPPO LEIGHTON TOWER  
103 LEIGHTON RD, CAUSEWAY BAY  
HONG KONG  
P: +852.2682.9633  
F: +852.2682.9790

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Belmont Bank & Trust Company

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:

Summer Moorman

Name of Person

BFKN, LLP

Firm/Company

200 W. Madison Street, Suite 3900

Address

Chicago, Illinois 60606

City/State and Zip code

rbanks@belmontbank.com ✓

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

For further information concerning this matter, please call:

Summer Moorman

at ( 312 ) 629-5141

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

**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. Belmont Bank & Trust Company  
(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. Illinois 3. 56-2580290  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. June 14, 2006 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. Not Applicable  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 8250 West Belmont Avenue, Chicago, Illinois 60634  
(Principal office street address)
- \_\_\_\_\_  
(Current mailing address, if different)

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

Name: COGENCY GLOBAL INC.

Office Address: 115 N. Calhoun St., Suite 4  
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.*

/s/Lisa Workman

(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]:

### A. DIRECTORS

☐ Chairman Name: William F. McCarty III  
☐ Vice Chairman Address: 8250 West Belmont Avenue  
☒ Director Chicago, Illinois 60634  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other CEO ☐ Other \_\_\_\_\_

☐ Chairman Name: David M. Peshek  
☐ Vice Chairman Address: 8250 West Belmont Avenue  
☐ Director Chicago, Illinois 60634  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other Sr. Vice President ☒ Other COO

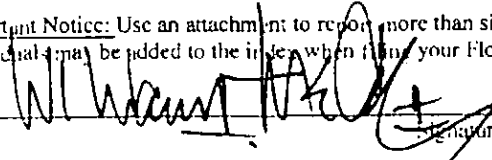
☒ Chairman Name: James J. Banks  
☐ Vice Chairman Address: 8250 West Belmont Avenue  
☒ Director Chicago, Illinois 60634  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Jose O. Torres  
☐ Vice Chairman Address: 8250 West Belmont Avenue  
☐ Director Chicago, Illinois 60634  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other Sr. Vice President ☐ Other \_\_\_\_\_

☐ Chairman Name: Ronald J. Banks  
☐ Vice Chairman Address: 8250 West Belmont Avenue  
☐ Director Chicago, Illinois 60634  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other CFO ☐ Other \_\_\_\_\_

☐ Chairman Name: Catherine M. Adduci  
☐ Vice Chairman Address: 8250 West Belmont Avenue  
☒ Director Chicago, Illinois 60634  
☐ 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. William F. McCarty III-President & CEO, and Director  
(Typed or printed name and capacity of person signing application)

**ATTACHMENT TO APPLICATION BY FOREIGN CORPORATION FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

A) LIST OF OFFICERS AND DIRECTORS (CONTINUED):

Name	Title	Address
James A. DeLeo	Vice Chairman and Director	8250 West Belmont Avenue, Chicago, Illinois 60634
Riccardo A. Di Monte	Director	8250 West Belmont Avenue, Chicago, Illinois 60634
Sylvester J. Kerwin, Jr.	Director	8250 West Belmont Avenue, Chicago, Illinois 60634
Christopher R. Stephens	Director	8250 West Belmont Avenue, Chicago, Illinois 60634



Commissioner Russell C. Weigel, III

November 3, 2021

Summer C. Moorman, Paralegal  
Barack Ferrazzano, Kirschbaum  
& Nagelberg LLP  
299 W. Madison Street, Suite 3900  
Chicago, Illinois 60606

Re: Belmont Bank & Trust Company

Dear Ms. Moorman:

Reference is made to your recent letter requesting approval to register the above-referenced name with the Florida Secretary of State by Belmont Bank & Trust Company. The bank is a Chicago state-charted Bank, regulated by the Illinois Department of Financial & Professional Regulation – Division of Banking. The bank is headquartered in Chicago, Illinois.

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,

Russell C. Weigel, III  
Commissioner  
Office of Financial Regulation

RCW:jrtj

cc: Gina McLeod, Chief, Bureau of Commercial Recordings, Division of Corporations,  
Department of State



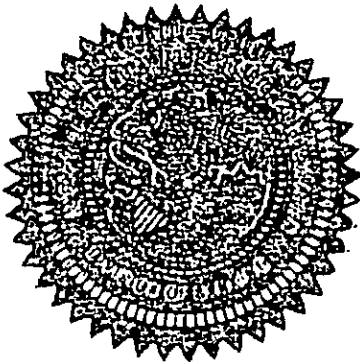
*State of Illinois*  
*Department of Financial and Professional Regulation*  
*Division of Banking*

*Date:* November 4, 2021

*Certificate*

I, **CHASSE REHWINKEL**, do hereby certify that, according to the records maintained by the Illinois Department of Financial and Professional Regulation, Division of Banking, **BELMONT BANK & TRUST COMPANY, COOK COUNTY, CHICAGO, ILLINOIS**, has held and continues to hold authority to do a general banking business as provided by the Illinois Banking Act and as permitted by its charter.

IN TESTIMONY WHEREOF, I hereby subscribe  
my name.



DEPARTMENT OF FINANCIAL AND  
PROFESSIONAL REGULATION of the  
State of Illinois;  
MARIO TRETO, JR., ACTING SECRETARY

DIVISION OF BANKING

A handwritten signature in cursive script, reading "Chasse Rehwinkel".

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Chasse Rehwinkel  
Acting Director