F21000006931

(Requestor's Name)				
(Address)				
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(Ci	ty/State/Zip/Phone #	#)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates o	of Status		
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SECRETARY OF STATE

DEC 06 2021 M. SOLOMON

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.

	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"		
, 201,	, , , , , , , , , , , , , , , , , , ,			
	•			
•		adopted for the purpose of transacting business in Flo	orida)	
Mississippi 3.		64-0134513		
(State or country	(State or country under the law of which it is incorporated) (FEI num			
03/12/1909		Perpetual .		
(Date of incorporation)		(Date of duration, if other than perpetual)	(Date of duration, if other than perpetual)	
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)		
	et, Belzoni, Mississippi 39038			
	(Principal of	fice <u>street</u> address)	·	
1068 Highland C	olony Parkway, Ridgeland, MS 39157		sit co	
	(Current maili	ng address, if different)		
Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	SS (SS)	
Name:	C T Corporation			
	1200 South Pine Island Road		OF STA	
Office Address:			-	
	Plantation	, Florida 33324	·//11 C	
	(City)	(Zip code)		
. Registered ago	ent's acceptance:			
laving been nam	ied as registered agent and to accept serv	ice of process for the above stated corporation a	it the place	
esignated in this orther agree to c	application, I hereby accept the appoint omply with the provisions of all statutes	ment as registered agent and agree to act in this relative to the proper and complete performance	rcapacuy. 2 of my du	
nd Lam familiai	with and accept the obligations of my p	osition as registered agent.		
	Conisc	Bell		
	(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.

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A. DIRECTORS			
Chairman	Thomas G. Peaster Name:	□ Chairman	Name:
□Vice Chairman	Address: 1068 Highland Colony Pkwy	□Vice Chairman	Address:
■ Director	Ridgeland, MS 39157	■Director	Ridgeland, MS 39157
□President		President	
□Vice President		□ Vice President	
□ Secretary	Treasurer	☐ Secretary	□Treasurer
Other	□Other	Officer Officer	Other
□Chairman	Randall E. Howard	□Chairman	B. Bryan Jones, III
□Vice Chairman	1068 Highland Colony Playy	□Vice Chairman	Address: 1068 Highland Colony Pkwy
■ Director	Ridgeland, MS 39157	■ Director	Ridgeland, MS 39157
□President		□President	
□Vice President		□ Vice President	**************************************
☐ Secretary	□Treasurer	☐Secretary	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
Other	Other	Other	□ Treasurer
□Chairman	Name:	□Chairman	Name: Eugene F. Webb, Jr.
	Address: 1068 Highland Colony Pkwy		Address:
□ Director	Ridgeland, MS 39157	Director	Ridgeland, MS 39157
□President		President	
■Vice President		■ Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
Officer Officer	Other	Officer Other	Other
Important Notice: individuals may be	Use an attachment to report more than six (6). The attachment to report more than six (6).	ment of State Annual Re	d for reporting purposes only. Non-indexed sport form.

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.

Executive Vice President and Chief Financial Officer

A. DIRECTORS Gregory A. Ray Thomas R. Hudson □ Chairman Name: ☐ Chairman 1068 Highland Colony Pkwy 1068 Highland Colony Pkwy Address: □ Vice Chairman Address: ☐ Vice Chairman Ridgeland, MS 39157 Ridgeland, MS 39157 □ Director □ Director □President □President ■ Vice President □ Secretary □Treasurer ☐ Secretary □Treasurer Officer Officer □Other _____ 🗐 Other 🧾 ☐Other _____ Name: Max S. Yates □ Chairman ☐ Chairman 1068 Highland Colony Pkwy □ Vice Chairman Address: ☐ Vice Chairman Address: Ridgeland, MS 39157 ■ Director □ Director □ President □President ■ Vice President □ Vice President □ Secretary ☐ Treasurer □ Secretary □ Treasurer Officer Officer □Other _____ □Other Other ____ □Chairman Name: _____ ☐ Chairman Name: _____ □Vice Chairman Address: □ Vice Chairman Address: □ Director □ Director □President □ President □ Vice President ______ ☐ Vice President □ Secretary □Treasurer □ Secretary ☐Treasurer ☐Other _____ 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. 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. (Typed or printed name and capacity of person signing application)



Commissioner Russell C. Weigel, III

December 1, 2021

Linda Dale, Paralegal Jones Walker LLP 190 E. Capitol Street Jackson, Mississippi 39201

Re: BankPlus

Dear Ms. Dale:

Reference is made to your recent letter requesting approval to register the above-referenced name with the Florida Secretary of State by BankPlus. The bank is a Mississippi state-charted Bank, regulated by the Mississippi Department of Banking and Consumer Finance. The bank is headquartered in Belzoni, Mississippi.

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:jrj

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



Office of the Secretary of State Jackson, Mississippi

Certificate of Good Standing

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on the 12th day of March, 1909, the State of Mississippi issued a Charter/ Certificate of Authority to:

BANKPLUS

That the state of incorporation is Mississippi.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

That insofar as the records of this office are concerned, the said BANKPLUS is in good standing at this time.

Given under my hand and seal of office the 6th day of December, 2021

Midrael Watson

Certificate Number: CN21125758

Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 28, 2021

MARY ANN SOUTHERLAND BANKPLUS 1068 HIGHLAND COLONY PKWY RIDGELAND, MS 39157

SUBJECT: BANKPLUS CORPORATION

Ref. Number: W21000009062

We have received your document for BANKPLUS CORPORATION and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Rec16-21

Letter Number: 221A00002054