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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
W23000119918

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2023 SEP -5 AH 9: 50

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M



September 6, 2023

CSC TALLAHASSEE

SUBJECT: LIBERTY BANK Ref. Number: W23000119918

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

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Letter Number: 623A00020457

Corey Pettway Regulatory Specialist II

www.sunbiz.org

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 971056 4722819

AUTHORIZATION

COST LIMIT : 75 70.00

ORDER DATE: September 5, 2023

ORDER TIME : 1:52 PM

ORDER NO. : 971056-005

CUSTOMER NO: 4722819

#### FOREIGN FILINGS

NAME: LIBERTY BANK

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

## **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT:	Liberty Bank				
V 2 2 2 2 1 1 1		Name of corpora	tion - mus	t include suffix	
Dear Sir or M	adam:				
"Certificate of	f Existence," or "C		"gnibnas	and check are sub	et Business in Florida," mitted to register the
Please return :	all correspondence	concerning this ma	itter to the	following:	
Patricia D. And	derson, Esq.				
		Name	of Persor	1	
Updike, Kelly	& Spellacy, P.C.				
		Firm/0	Company		·
225 Asylum St	reet, 20th Floor				
		A	ddress		
Hartford, CT (	06103				
		City/Sta	te and Zip	code	
panderson@uk					
	E-ma	il address: (10 be us	ed for futi	ire annual report r	otification)
For further in	formation concern	ing this matter, plea	se call:		
Patricia D. And	derson, Esq.	at ( 860	) 54	8-2684	
Name	e of Person	Arca		Daytime Telep	none Number
Regis Divisi The C 2415 Tallah Enclosed is a Please make ch	ing Fee 🔲 \$73	s ec Suite 810 wing amount: DRIDA DEPARTME	☐ \$78.°	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations
		di Essessi	Corr		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.

Liberty Bank C	•		
(Enter name of co	orporation; must include "INCORPORAT orp." "Inc." "Co." or "Corp.")	ED," "COMPANY." "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)	
2. Connecticut		3. 06-0452570 (FEI number, if applicable)	
(State or country	y under the law of which it is incorporated	f) (FEI number, if applicable)	,
4. May 1, 1825			
(Date	of incorporation)	5. (Date of duration, if other than perpetual)	
6.			
	(SEE SECTIONS 607.1501 & 60	ess in Florida, if prior to registration) 07.1502. F.S., to determine penalty liability)	
7. 245 Long Hill Ro	ad, Middletown, CT 06457		
	(Principal	office <u>street</u> address)	
	<u>-</u>		~3
	(Current m	nailing address, if different) م	.023
8. Name and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)	SEP SEP
Name:	Corporation Service Company		5 5
Office Address:	1201 Hays Street		N 9: 50
	Tallahassee	, Florida 32301	7.S.T. 9.5
	(City)	(Zip code)	产品 台
designated in this further agree to co	ed as registered agent and to accept s application, I hereby accept the appo	service of process for the above stated corporation at the pointment as registered agent and agree to act in this capa- tes relative to the proper and complete performance of my y position as registered agent.	city. I
-	(Registered agen	t's signature)	

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

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.

Please see attached Certificate of Good Standing from the State of Connecticut Department of

Existence from the Connecticut Secretary of State's Office.

Banking. Please see attached communications from Jeremy W. Smith, Director, Division of Financial Institutions Office of Financial Regulations. Please see attached Certificate of Legal

A. DIRECTORS				
□Chairman	Name:	□ Chairman	Name: Doug Anderson	
□Vice Chairman	Address: 245 Long Hill Road	□Vice Chairman	Address: 245 Long Hill Road	
<b>a</b> Director	Middletown, CT 06457	■ Director	Middletown, CT 06457	
🖬 President		□President		
□Vice President		□Vice President		
☐Secretary	□Treasurer	□ Secretary	□Treasurer	
Other	□Other	Other	□Other	
□ Chairman	Name: Kathleen Doucette	□Chairman	Name: Jean M. D'Aquila	
□ Vice Chairman	245 Long Hill Road	□Vice Chairman	Address: 245 Long Hill Road	
Director	Middletown, CT 06457	Director	Middletown, CT 06457	
□President		President		
□Vice President		□Vice President		
□ Secretary	置 Treasurer	<b>⊡</b> Secretary	☐ Treasurer	
□Other	Other	□ Other	□Other	
□Chairman	Name: Mark R. Gingras	□ Chairman	Name: Kolawole Olofinboba	
□Vice Chairman	245 Long Hill Road	□ Vice Chairman	Address: 245 Long Hill Road	
☐ Director	Middletown, CT 06457	Director	Middletown, CT 06457	
□President		□ President		
□Vice President		□Vice President	<u> </u>	
☐Secretary	□Treasurer	□Secretary·	□Treasurer	
□Other	□ Other	□Other	Other	
12. The officer or direction	ctor signing this document (and who is listed in nu	riment of State Annual Re tor or Officer mber 11 above) affirms th	d for reporting purposes only. Non-indexed port form.	
she is aware that ft s.817.155, F.S.	avid W. Glidden Pr (Typed or printed name and capacity of	partment of State constitu USI LENT	tes a third degree felony as provided for in	

Timothy Ryan - Director of Liberty Bank	245 Long Hill Road, Middletown, CT 06457
David Director - Director of Liberty Bank	245 Long Hill Road, Middletown, CT 06457
William T. Christoper - Director of Liberty Bank	245 Long Hill Road, Middletown, CT 06457
Steve J. Gorss - Director of Liberty Bank	245 Long Hill Road, Middletown, CT 06457
Chandler J. Howard - Director of Liberty Bank	245 Long Hill Road, Middletown, CT 06457
Wilfredo Nieves - Director of Liberty Bank	245 Long Hill Road, Middletown, CT 06457
Elsa Nunez - Director of Liberty Bank	245 Long Hill Road, Middletown, CT 06457
David Mitchell - Founder & CEO of Owners Bank (a division of Liberty Bank)	245 Long Hill Road, Middletown, CT 06457
Lizette Nigro - Chief Product Officer of Owners Bank (a division of Liberty Bank)	245 Long Hill Road. Middletown. CT 06457
Harry Gunsallus – Chief Operating Officer of Owners Bank (a division of Liberty Bank)	245 Long Hill Road, Middletown, CT 06457

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# STATE OF CONNECTICUT DEPARTMENT OF BANKING FINANCIAL INSTITUTIONS DIVISION 260 CONSTITUTION PLAZA – HARTFORD, CT 06103



Jorge L. Perez Commissioner

### **CERTIFICATION OF GOOD STANDING**

I, Jorge L. Perez, Banking Commissioner of the State of Connecticut Department of Banking, do hereby certify that **Liberty Bank** is a Connecticut state-chartered bank, duly organized and existing under the laws of the State of Connecticut, and located in **Middletown**, Connecticut.

In Testimony Whereof, I have hereunto set my hand and affixed my seal at Hartford, Connecticut, this 16<sup>th</sup> day of August, 2023.

COMMISSION

Jorge L. Perez Bänking Commissioner