FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K19929

1. Entity Name

HAMILTON BANCORP INC.

FILED
02 FEB -5 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3750 N.W. 87 Avenue	1172 South Dixie Highway
Suite, Apt. #, etc.: 7th Floor	Suite, Apt. #, etc.: PMB 410
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33178 Country: USA	Zip: 33146 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 650105414 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street

City: Tallahassee FL Zip Code: 32301

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Deborah D Skipper — Deborah D Skipper — 2/5/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
Asst. V. Pres

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	C/P/D	TITLE	
NAME	Masferrer, Eduardo A.	NAME	
STREET ADDRESS	1172 S. Dixie Highway, PMB 410	STREET ADDRESS	
CITY-ST-ZIP	Miami, Florida 33146	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Alexander, William	NAME	
STREET ADDRESS	1172 S. Dixie Highway, PMB 410	STREET ADDRESS	
CITY-ST-ZIP	Miami, Florida 33146	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Frazier, Ronald	NAME	
STREET ADDRESS	1172 S. Dixie Highway, PMB 410	STREET ADDRESS	**DO NOT WRITE**
CITY-ST-ZIP	Miami, Florida 33146	CITY-ST-ZIP	
TITLE	S/V/D	TITLE	**IN THIS SPACE**
NAME	Bernace, Carlos	NAME	
STREET ADDRESS	1172 S. Dixie Highway, PMB 410	STREET ADDRESS	
CITY-ST-ZIP	Miami, Florida 33146	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Lyle, George	NAME	
STREET ADDRESS	1172 S. Dixie Highway, PMB 410	STREET ADDRESS	
CITY-ST-ZIP	Miami, Florida 33146	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Lacayo, Ronald	NAME	
STREET ADDRESS	1172 S. Dixie Highway, PMB 410	STREET ADDRESS	
CITY-ST-ZIP	Miami, Florida 33146	CITY-ST-ZIP	

CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered. By: Carlos Bernace, VP, Secretary and Director

SIGNATURE: [signature] EVP & SECRETARY 02/01/2002 (305) 586-6283
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

900004880959--5

ACCOUNT NO. : 072100000032

REFERENCE : 347326 4303929

AUTHORIZATION : Patricia F

COST LIMIT : $ 150.00

ORDER DATE : February 5, 2002

ORDER TIME : 10:33 AM

ORDER NO. : 347326-010

CUSTOMER NO: 4303929

CUSTOMER: Ms. Julie M. Levitt
Greenberg Traurig, P.a.
1221 Brickell Avenue
21st Floor
Miami, FL 33131-3238

RECEIVED
02 FEB -5 AM 11:23
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CHANGE OF AGENT

NAME: HAMILTON BANCORP INC.

900004880959--5

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Angie Glisar -- EXT# 1124

EXAMINER: _____