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C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Florida Bank of Commerce  
Name of Corporation

**DOCUMENT NUMBER:** P05000118467

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dana Kilborne

Name of Contact Person

Florida Bank of Commerce

Firm/Company

105 E Robinson Street Suite 303

Address

Orlando, FL 32801

City/State and Zip Code

dkilborne@fbcbank.com

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

For further information concerning this matter, please call:

Phillip Tasker

Name of Contact Person

at ( 321 ) 751-6999

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Florida Bank of Commerce
2. The principal office address: 105 East Robinson Street Suite 303 Orlando, FL 32801
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/01/2010 Document number: P05000118467

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

R Van Bogan

105 East Robinson Street Suite 303

Orlando, FL 32801 (resigned)

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Dana Kilborne

105 East Robinson Street Suite 303

P.O. Box NOT acceptable

Orlando, FL 32801

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Phillip Tasker  
Signature of an officer or director

Phillip Tasker, Executive Vice President  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Dana Kilborne  
Signature of Registered Agent

5/21/14  
Date

If signing on behalf of an entity:

DANA KILBORNE  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
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