| Ploo | 215307 |
|--|--------------------------|
| (Requestor's Name) (Address) (Address) | 500193002225 |
| (City/State/Zip/Phone #) | 02/02/1101013014 **87.50 |
| (Business Entity Name) (Document Number) Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | 2011 FEB I 1 AH 8: 51 |
| 511 | of 2/15/11 |

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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5.

SUBJECT: Peoples First Florida National Bancshares, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

]\$70.00 Filing Fee

: **`**

Filing Fee & Certificate of Status

\$78.75

| \$78.75 Filing Fee & Certified Copy | Filing Fee, Certified Copy & Certificate of Status |
|---|---|
| ADDITIONAL COPY REQUIRED | |

FROM: Lourdes Cano

Name (Printed or typed)

1500 San Remo Avenue, Suite 145 Address

| Coral Gables, Florida 33146 | | ÛV. |
|--|--------|------|
| • City, State & Zip | | SEC |
| | Ē | N.S. |
| 305-662-6840 | | |
| Daytime Telephone number | * | Sec. |
| lulicano2@yahoo.com | AH 8: | Part |
| E-mail address: (to be used for future annual report notification) | ு ப | |

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NOTE: Please provide the original and one copy of the articles.



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2011

LOURDES CANO 1500 SAN REMO AVENUE SUITE 145 CORAL GABLES, FL 33146

SUBJECT: PEOPLES FIRST FLORIDA NATIONAL BANCSHARES, INC. Ref. Number: W11000006781

We have received your document for PEOPLES FIRST FLORIDA NATIONAL BANCSHARES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(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.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. 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.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 411A00002946

VISION OF CONFIGNCE

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Peoples First National Shares, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address 1500 San Remo Avenue, Suite 145 Coral Gables, Florida 33146

| 2011 | FEB | H. | AM | R٠ | 5 | 1 |
|------|-----|----|----|-------------|---------|---|
| | | | | F 1. | | |

1111 SECRETAR / OF STATE

CHATU N

Mailing address, if different is:

same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Investments

ARTICLE IV SHARES

7,500 shares The number of shares of stock is:

ARTICLE V **INITIAL OFFICERS AND/OR DIRECTORS**

| Name and Title Address: | Isaac Mildenberg - President 1500 San Remo Avenue, Suite 145 Coral Gables, FI 33146 | Address: | David Mildenberg - VicePresident 1500 San Remo Avenue, Suite 145 Coral Gables, Fl 33146 |
|----------------------------|---|----------------------------|--|
| Name and Title Address: | Dora Renee Mildenberg - S/T 1500 San Remo Avenue, Suite 145 Coral Gables, Fl 33146 | Name and Title Address: | ······ |
| Name and Title Address: | · | | × |

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

| Name: | Lourdes Cano |
|----------|---------------------------------|
| Address: | 1500 San Remo Avenue, Suite 145 |
| | Coral Gables, FI 33146 |

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

| Name: | Lourdes Cano |
|----------|---------------------------------|
| Address: | 1500 San Remo Avenue, Suite 145 |
| | Coral Gables, FI 33146 |

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

February 8, 2011 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Required Signature/Incorporator

February 8, 2011 Date