Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000001040 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

Prom:

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.

Account Number : 076117000420 Phone : (561)650-0728

Fax Number : (561)671-2527

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: joliver@stonegatebank.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Stonegate Acquisition Sub I, Inc.

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002/003 FILED SEERE TARY OF STATE DIVISION OF CORPORATION

ARTICLES OF INCORPORATION

2014 JAN -3 PM 1: 24 In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE I NA	ME Stonegate Acquision shall be: Stonegate Acquision shall be:	1011 042 1, 1110.
	INCIPAL OFFICE Principal street address ederal Highway	Mailing address, if different is
ort Lauderd	ale, <u>FL 33304</u>	
TICLE III PUI purpose for which	the corporation is organized is: Any and	d all lawful business.
TICLE IV SH	ARES 1 000 000	
ricle v ini	ARES 1,000,000 TIAL OFFICERS AND/OR DIRECTOR c: David Seleski, President and Director	
ricle v ini	TIAL OFFICERS AND/OR DIRECTOR David Seleski, President and Director 1430 North Federal Highway	Name and Title:
Name and Titl	TIAL OFFICERS AND/OR DIRECTOR David Seleski, President and Director	Name and Title:
Name and Titl	TIAL OFFICERS AND/OR DIRECTOR David Seleski, President and Director 1430 North Federal Highway Fort Lauderdale, FL 33304	Name and Title:
Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR David Seleski, President and Director 1430 North Federal Highway Fort Lauderdale, FL 33304	Name and Title:
Name and Title Address Name and Title	TIAL OFFICERS AND/OR DIRECTOR David Seleski, President and Director 1430 North Federal Highway Fort Lauderdale, FL 33304	Name and Title:
Name and Title Address Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR E. David Seleski, President and Director 1430 North Federal Highway Fort Lauderdale, FL 33304	Name and Title:

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SECRETARY OF STATE OF STATE

2014 JAN -3 PM 1:24

Name a	nd Title:	Name and Title:
Addres	s	Address:
ARTICLE VI	REGISTERED AGENT Societa street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Gerald W. Oliver	-
Address:	1430 North Federal Highway	
	Fort Lauderdale, FL 33304	
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name:	David Seleski	
Address:	1430 North Federal Highway	
	Fort Lauderdale, FL 33304	
	med as registered agent to accept service of process am familiar with and accept the appointment as regi	for the above stated corporation at the place designated in stered agent and agree to act in this capacity
/s/ Gerald W		1/2/14
	Required Signature/Registered Agent	Date
I submit this document to the	cument and affirm that the facts stated herein are t Department of State constitutes a third degree felony	rue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
/s/ David Sel	eski	1/2/14
Required Signature/Incorporator		Date