

P960000061146

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

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

Email Address: \_\_\_\_\_

DATE OF SUBMISSION

7/27

**REGISTERED AGENT CHANGE  
MFB FINANCIAL, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	024
Estimated Charge	\$35.00

27th

*PA Change*

Electronic Filing Menu

Corporate Filing Menu

Help

7/28/2016 10:29:36 AM From: To: 8506176380( 2/4 )

850-817-6381

7/28/2016 9:48:29 AM PAGE 1/001 Fax Server



July 28, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

MFB FINANCIAL, INC.  
1200 PLANTATION ISLAND DRIVE SOUTH  
SUITE 210  
ST. AUGUSTINE, FL 32080

SUBJECT: MFB FINANCIAL, INC.  
REF: P96000061146

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

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) 245-6050.

Darlene Connell  
Regulatory Specialist III

FAX Aud. #: H16000180459  
Letter Number: 316A00015826

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REGISTRY

\*RE-SUBMIT\*

Please re-submitting  
date of submission 7/27

7/28/2016 10:29:36 AM From: To: 8506176380( 3/4 )

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: MFB FINANCIAL, INC.

Name of Corporation

DOCUMENT NUMBER: P96000061146

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:

Daniel Yi

Name of Contact Person

NFP

Firm/Company

340 Madison Avenue, 20th Floor

Address

New York, NY 10173

City/State and Zip Code

dhrankaj@nfp.com

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

For further information concerning this matter, please call:

Daniel Yi

212

301-4000

Name of Contact Person

at (

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

CR2E045 (03/12)

**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: MFB FINANCIAL, INC.
2. The principal office address: 1200 PLANTATION ISLAND DRIVE SOUTH,  
SUITE 210, ST. AUGUSTINE, FL 32080
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 07/19/1996 Document number: P96000061146
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)

BAILEY, MARK F

1200 PLANTATION ISLAND DR SOUTH, SUITE 210

ST. AUGUSTINE, FL 32080

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

C T Corporation System

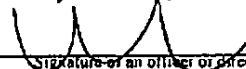
c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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.

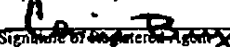
  
Signature of an officer or director

Veronica Moo, 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.

C T Corporation System

By:   
Signature of Registered Agent

7/27/2016  
Date

If signing on behalf of an entity:

Connie Layton

Connie Layton  
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

CR2E045 (03/12)

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TALLAHASSEE, FLORIDA