# 000008176

						(
<u>CS</u> [	Th	IE UI	Y <i>IT.</i>	ED S	TAT	ES
		RPO.				_

ACCOUNT NO. : 07210000032

REFERENCE: 677694 7143623

AUTHORIZATION:

COST LIMIT : \$ PREPAID

ORDER DATE: January 22, 1998

ORDER TIME : 10:0 AM

ORDER NO. : 677694-005

CUSTOMER NO:

7143623

CUSTOMER: Mr. James G. Nichols

MR. JAMES G. NICHOLS

2575 Harn Boulevard

Clearwater, FL 34624

DOMESTIC FILING

NAME:

SECURITY BANCORP OF FLORIDA

INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

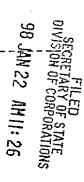
\_\_\_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Daniel W Leggett

EXAMINER'S INITIALS:

W98-1591





## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

January 23, 1998

CSC NETWORKS 1201 HAYS STREET TALLAHASSEE, FL 32301

Please give original submission date as 454 date

SUBJECT: SECURITY BANCORP OF FLORIDA INC

Ref. Number: W98000001591

We have received your document for SECURITY BANCORP OF FLORIDA INC. However, the document has not been filed and is being returned for the following:

Written approval and clearance of the terms BANK, BANKER, BANC, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION must be obtained from the Division of Banking and Finance, pursuant to section 655.922(2a), Florida Statutes. The address is:

Division of Banking Director's Office 101 E. Gaines St. Fletcher Bldg., 6th Floor. Tallahassee, FL 32399-0350 (850) 488-1111.

Please return the 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) 487-6973.

Claretha Golden Document Specialist

Letter Number: 498A00003826

DIVISION OF CORPORATIONS

98 JAN 22 AM11: 27

#### ARTICLES OF INCORPORATION

<u>OF</u>

Security Lian Corp of Florida INC

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE | NAME

The name of the corporation shall be: Security LanCopp of Florida INC

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2575 Harn Boulevard

Clearwater, Florida 34624

#### ARTICLE III CAPITAL STOCK

The number of snares of stock that this corporation is authorized to have outstanding at any one time is: .7500

### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is: James G. Nichols

2575 Harn Boulevard

Clearwater, Florida 34624

#### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are): James 6.Nichols

2575 Harn Boulevard

Clearwater, Florida 34624

David DeSeria 2575 Harn Boulevard Clearwater, Florida 34624

The undersigned has(have) executed these Articles of Incorporation this

James J. 1998.

James J. Works President
Signature/Title Secretary
Signature/Title Secretary
Signature/Title



# CERTIFICATE OF DESIGNATION: REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Security Lancorp of Florida INC
2. The name and address of the registered agent and office is:
James G. Nichols (NAME)
· · · · · · · · · · · · · · · · · · ·
2575 Harn Boulevard (P.O. BOX NOT ACCEPTABLE)
Clearwater, Florida 34624 (CITY/STATE/ZIP)
(CITY/STATE/ZIP)
e de la companya della companya della companya de la companya della companya dell
SIGNATURE (corporate officer)
TITLE President
DATE 1/21/98
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
PHOCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PER-
"ORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGA-
TIONS OF MY POSITION AS REGISTERED AGENT.
SIGNATURE fame II- Hishols
DATE 1/21/98