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COVER LETTER

TO:

Amendment Section Division of Corporations

CenterState Banks, Inc.

P99000082771

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:

Beth DeSimone

Name of Contact Person

CenterState Banks, Inc.

Firm/Company

1101 First Street South, Suite 202

Address

Winter Haven, FL 33880

City/State and Zip Code

bdesimone@centerstatebank.com

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

For further information concerning this matter, please call:

Beth DeSimone

Name of Contact Person

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: CenterState Banks, Inc.
2. The principal office address: 1101 First Street South, Suite 202, Winter Haven, FL 3388
3. The mailing address (if different):
4. Date of incorporation/qualification: 09/20/1999 Document number: P99000082771
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)
Jennifer Idell
1101 First Street South, Suite 202
Winter Haven, FL 33880
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Beth DeSimone
1101 First Street South, Suite 202
P O Box NOT acceptable
Winter Haven, FL 33880
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.
Jennifer Ideii, CFO
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 sereby confirm that the corporation has been notified in writing of this change.
6/7/2017
Signature of Registered Agent Date
f signing on behalf of an entity:
Beth S. DeSimone 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