## 017000000013

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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MI FIG. -6 P 3 37

**S Warren** FEB 0 7 2017

## **COVER LETTER**

_	stration Section sion of Corporations						
SUBJECT:	FineMark National Bank & Trust						
	(Name of Alien Business Organization or Financial Institution)						
Dear Sir or M	Madam:						
	I Designation of Registered stitution and fee(s) are subm		Registered Office for Alien Busing.	ness Organization or			
Please return	all correspondence concern	ning this ma	atter to the following:				
Read Saw	yczyn						
	(Name of Person)						
FineMark	National Bank & Trust						
	(Firm/Company)		<del></del>				
12681 Cre	eekside Lane						
	(Address)		·				
Fort Myers	s, FL 33919						
	(City/State and Zip Cod	le)	<del></del>				
For further i	nformation concerning this	matter, plea	ise call:				
Read Saw	vczyn	239	, 461-5900				
•	(Name of Person)		Code & Daytime Telephone Nur	nber)			
Registration Division of Clifton Build 2661 Execut	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is	a check for the following a	amount:					
■ \$35.00 Fi	ling Fee		□ \$43.75 Filing Fee & Ce	rtified Copy			

## DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION

PURSUANT TO SECTION 607.0505 OR 655.0201, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. FineMark Nation:					
	(Name of alien business organi				_
2. USA \ \L		3	20-8075599		
(State or country under which entity is organized)		-	(FEI Number,	if applicable)	
12681 Creekside	Lane, Fort Myers, FL 3391	9		#5.4	
· · · · · · · · · · · · · · · · · · ·	(Principal of	fice address)		Emile his her emile general d	
5. Name and Florida Str	reet address of registered agent.			and A	A P
	Brian J. Eagleston				Osedinal Second
	12681 Creekside Lane			ט אָרַ	5
	Fort Myers, FL 33919			ORRIG ORRIG	
6. The street address of are identical 7.	the registered office and the street (Signature of chairman, v			of the registered a	gent —
8. Brian J. Eaglesto	n, Chief Financial Officer				
	(Name and capacity of persor	signing in	number 7 above)		
9. Signature of registere	ed agent:	E.	$\supset$		
I hereby accept the app 607.0505 or 655.0201,	pointment as registered agent. I Florida Statutes.	am famili	ar with and accept	the obligations o	f sectior
BAS			<i>j</i>	30-17	
Registered agent	accepting appointment)	-	<del>`</del> <del>`</del>	(Date)	

THE FILING OF THIS FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

## **FILING FEE \$35**

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 Tallahassee, FL 32314