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10 NOV 22 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 11/24/10

## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** HomeownersAtRisk Org. Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☒ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50 ✓  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: Carmen Mitcheltree  
Name (Printed or typed)

P.O. Box 521043  
Address

Longwood, FL 32752-1043  
City, State & Zip

310-986-4189  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S. (Not for Profit)

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**Article I Name**

The name of the corporation shall be: **HomeownersAtRisk.Florida.Org, Inc.**

**Article II Principal Office**

The principal street address and mailing address, if different are:

Street Address is: 119 Eastern Fork, Longwood, FL 32750

Mailing Address is: PO Box 621043, Longwood, FL 32750

**Article III Purpose**

- (1) Build capacity to acquire bank owned (REO) properties which will be processed for the homeowners at risk to purchase on a 2 year lease option program.
- (2) Provide intervention programs such as: (a) Life Coaching, (b) Financial Management Education, (c) Career Development, and (d) Small Business Incubator program.

**Article IV Manner of Election**

The manner in which the directors are elected or appointed: as set forth in the Bylaws.

**Article V Initial Directors and/or Officers**

List name(s), address(es) and specific title(s):

Carmen Mitcheltree - 1966 General St. Rancho Palos Verdes, CA 90276

Ramon Faustmann - 119 Eastern Fork, Longwood, FL 32750

Romulo Parani - 426 Alston Dr, Orlando, FL 32836

**Article VI Initial Registered Agent and Street Address**

The name and Florida street address: (P.O. Box NOT acceptable) of the registered agent is: Carmen Mitcheltree, 119 Eastern Fork, Longwood, FL 32750

**Article VII Incorporator**

The **name and address** of the Incorporator is:

Carmen Mitcheltree, 119 Eastern Fork, Longwood, FL 32750

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Carmen Mitcheltree  
Signature - Registered Agent, Carmen Mitcheltree

November 10, 2010  
Date

Carmen Mitcheltree  
Signature - Incorporator, Carmen Mitcheltree

November 10, 2010  
Date