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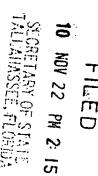
(Requestor's Name)
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# **COVER LETTER**

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

SUBJECT: Homeowner	rsAtRisk Org. Inc					
	SAtRisk Org. Inc. (PROPOSED CORPORAT	E NAME – <u>MUST INCLU</u> I	DE 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  ADDITIONAL CO	\$87.50 \rightarrow Filing Fee, Certified Copy & Certificate  PY REQUIRED			
FROM: Carmen Mitcheltree  Name (Printed or typed)						
	PO Box 521043	ddress				
	Longwood, Fl. 32752-1043 City, S	State & Zip				

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

Daytime Telephone number

310-986-4189

#### ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S. (Not for Profit)

FILED 10 NOV 22 PH 2: 15

#### Article I Name

SEGRETARY OF STATE The name of the corporation shall be: **HomeownersAtRisk.Florida.Org**, **Itic** SSEE, FLORRIDA

### 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 521043, 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 90275 Ramon Faustmann - 119 Eastern Fork, Longwood, FL 32750 Romulo Parani - 425 Alston Dr. Orlando, FL 32835

# 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 <b>name and address</b> 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.

November 10, 2010 Date Thopemper 10, 2010 Signature - Registered Agent, Carmen Mitcheltree unen Matetelle

Signature - Incorporator, Carmen Mitcheltree