

P13000014291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

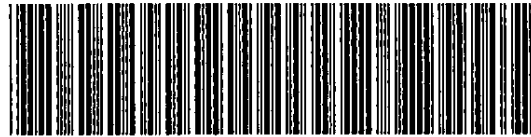
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300244512773

02/11/13--01035--022 \*\*70.00

FILED  
13 FEB 11 PM 1:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRD  
2/12/13

## COVER LETTER

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

SUBJECT: FAMILY TREE PROPERTIES Corp.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: JOHN RONZINO  
Name (Printed or typed)  
10560 NW 3<sup>RD</sup> PLACE  
Address  
CORAL SPRINGS, FLORIDA 33071  
City, State & Zip  
954-464-1878  
Daytime Telephone number  
MLEVINS1@COMCAST.NET  
E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: FAMILY TREE PROPERTIES CORP.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

10560 NW 3<sup>RD</sup> PLACE  
CORAL SPRINGS, FLORIDA  
33071

SAME

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

TO BUY, REPAIR AND SELL REAL ESTATE.

FILED  
13 FEB 11 PM 1:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 99

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JOHN RONZINO, -PRES. Name and Title: BRADLEY LEVINSON - VP

Address 10560 NW 3<sup>RD</sup> PLACE Address: 10403 NW 83 ST.  
CORAL SPRINGS, FL 33071 TAMARAC, FL 33321

Name and Title: JOHN RONZINO, JR. - SECY Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

(SAME ABOVE)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

(conti.)

FILED

Name and Title: \_\_\_\_\_ Name and Title: 13 FEB 11 PM 1:31  
Address \_\_\_\_\_ Address: SECRETARY OF STATE  
\_\_\_\_\_  
\_\_\_\_\_ TALLAHASSEE, FLORIDA  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

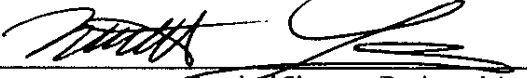
Name: MITCHELL LEVINSON  
Address: 10785 NW 64<sup>TH</sup> CT.  
PARKLAND, FL 33076

**ARTICLE VII INCORPORATOR**

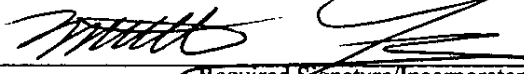
The name and address of the Incorporator is:

Name: MITCHELL LEVINSON  
Address: 10785 NW 64<sup>TH</sup> CT.  
PARKLAND, FL 33076

*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*

 2/5/13  
Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

 2/5/13  
Required Signature/Incorporator Date