





October 15, 2024

**Via Hand-Delivery**

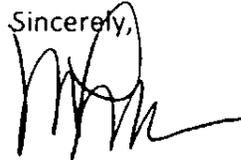
New Filing Section  
Florida Department of State  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Re: Mangrove Property Insurance Company  
Application for Articles of Incorporation**

Dear sir or madam,

Enclosed, please find a signed application for Articles of Incorporation on behalf of Mangrove Property Insurance Company, as well as a check in the amount of \$70.00.

Should you have any questions or require anything additional, please do not hesitate to contact our office. Thank you in advance for your time and consideration.

Sincerely,  


Meredith A. Lanford, RP, FRP  
Paralegal to the Firm  
[meredith@meenanlawfirm.com](mailto:meredith@meenanlawfirm.com)

/mal  
Enclosures





**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: Mangrove Property Insurance Company

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1309 Thomasville Road, Suite 300  
Tallahassee, FL 32302

Mailing address, if different is:  
1309 Thomasville Road, Suite 300  
Tallahassee, FL 32302

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any lawful purpose

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Stephen Weinstein, CEO  
20 Cherry Lane  
Address: Fairfield, CT 06824

Name and Title: Robert Ricker, Pres/COO/Secretary  
1309 Thomasville Road, Suite 300  
Address: Tallahassee, FL 32308

Name and Title: Anne Carmignani, Director  
20 Cherry Lane  
Address: Fairfield, CT 06824

Name and Title: Bartholomew Zanelli, Director  
16 Featherbed Lane  
Address: New Vernon, NJ 07979

Name and Title: Andrew Endicott, Director  
120 E. 7th Street  
Address: New York, NY 10009

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

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

**ARTICLE VI REGISTERED AGENT**

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

Name: Registered Agents Inc  
 Address: 7901 4th St N STE 300  
St. Petersburg FL 33702

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Robert Ricker President/Sec  
 Address: 1309 Thomasville Rd. Suite 300  
Tallahassee FL 32308

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: upon filing (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

*David Roberts*

10/07/2024  
 Date

Required Signature/Registered Agent

*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.*

*Robert Ricker*

10/7/2024  
 Date

Required Signature/Incorporator

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