

PI30000007380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

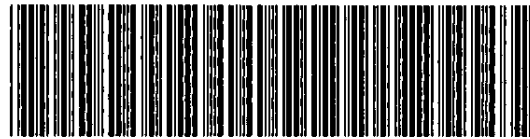
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100243667411

01/22/13--01036--008 **87.50

FILED
13 JAN 22 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
1/23/13

COVER LETTER

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

SUBJECT: **Standfast Solutions, Inc.**

(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: **Ian James Grant**

Name (Printed or typed)

5701 Mariner Street #701

Address

Tampa, FL 33609

City, State & Zip

(941) 416-3748

Daytime Telephone number

ijgrant1421@gmail.com

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)

FILED

13 JAN 22 AM 11:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Standfast Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5701 Mariner Street #701
Tampa, FL 33609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to perform any and all legal activities.

ARTICLE IV SHARES 1,000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ian James Grant, President

Name and Title: _____

Address: 5701 Mariner Street #701
Tampa, FL 33609

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

(conti.)

FILED

13 JAN 22 AM 11:28

Name and Title: _____

Name and Title: _____

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: Ian James Grant

Address: 5701 Mariner Street #701

Tampa, FL 33609

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ian James Grant

Address: 5701 Mariner Street #701

Tampa, FL 33609

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


Required Signature/Registered Agent

January 14, 2013

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.


Required Signature/Incorporator

January 14, 2013

Date