

P13000052629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

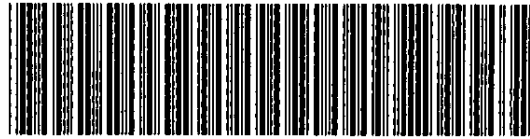
(Document Number)

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Special Instructions to Filing Officer:

W13-31417

Office Use Only



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05/28/13--01031--012 **70.00

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13 JUN 17 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: KPB 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 ☐ \$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: Kurt Busse

Name (Printed or typed)

11506 94th St

Address

Largo, FL 33773

City, State & Zip

(727) 392-4317

Daytime Telephone number

kbusse@tampabay.rr.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 30, 2013

KURT BUSSE
11506 94TH ST
LARGO, FL 33773

SUBJECT: KPB SOLUTIONS, INC.
Ref. Number: W13000031417

We have received your document for KPB SOLUTIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 213A00013618

Kurt P. Busse RN, BSN

11506 94th St N. Largo, FL 33773

Home telephone #: 727 392-4317

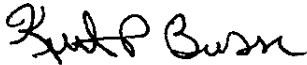
E-Mail: kbusse@tampabay.rr.com

June 13. 2013

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

My name is Kurt Busse i recently sent a letter of dissolution for KPB Solutions, LLC, due to a great loss of funds. After speaking with others it was decided an S -Corp was a better fit. So my recent paperwork is for KPB Solutions, IN, as KPB Solutions , LLC was dissolved. I herby write to inform the State of Florida I have no intention of revoking the dissolution of KPB Solutions, LLC. Therefore the name of KPB Solutions can be used for the S-corp to make KPB Solutions, INC.

I thank you for your time and assistance for sure!



Kurt P. Busse, RN

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

ARTICLE I NAME

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

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11506 94th St N.

Largo, FL 33773

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kurt Busse Director

Name and Title: _____

Address 11506 94th St

Address: _____

Largo, FL 33773

(727) 392-4317

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Kurt Busse
Address: 11506 94th St
Largo, FL 33773

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kurt Busse
Address: 11506 94th St
Largo, FL 33773

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

Kurt P Busse
Kurt P Busse Required Signature/Registered Agent

5/24/13
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.

Kurt P Busse
Kurt P. Busse Required Signature/Incorporator

5/24/13
Date