P17000000068

(Requestor's Name)
(Address)
(Address)
(100.000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Outlined Outline
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





400293292044

12/16/16--01003--010 **70.00

SECKETARY OF SEASON OF CHEEN SECRETARY OF CHEEN SEASON OF CHEEN SEASON OF CHEEN SEASON OF THE SEASON

EFFECTIVE DATE 01/01/17

~ 01/03/17

W16-084431



FLORIDA DEPARTMENT OF STATE Division of Corporations

16 DEC 30 PH 3: 03

ULLAL PERCIÁL UTCOMO PERCIÁL

December 19, 2016

ROBERT CRADDOCK 1704 BARON CT. PORT ORANGE, FL 32128

SUBJECT: GRAND BUSINESS SOLUTIONS INC.

Ref. Number: W16000084431

We have received your document for GRAND BUSINESS 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 an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is P15000095801.

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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 216A00026882

Grand Business Solutions Inc. 1704 Baron Ct. Port Orange, FL 32128 386-405-0855

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 (850)245-6052

December 12, 2016

Re: Document No.: P15000095801

Please accept this letter as my intent to not renew this corporation and to make the name available for use. Once that is done I plan on having the paperwork included filed and receive a new document number using the TAX ID NO: 81-0712588

If you have any questions I can be reached at 386-405-0855

Røbert Craddock

Mile [15] 30 PH 2: 15

SECRETARY OF SIGNED INVISION OF CORRESPONDED

COVER LETTER

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

SUBJECT: Gra	and Business Solutions Inc.			
SCISECT.	(PROPOSED CORPOR	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an	original and one (1) copy of the a	rticles of incorporation and	d a check for:	
■ \$70.00 Filing Fee	_ • • • • • • • • • • • • • • • • • • •	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	ADDITIONAL COPY REQUIRED	
FROM:	Name (Printed or typed) 1704 Baron Ct			
		Address		
	Port Orange, FL 32128			
	Cit	y, State & Zip		
	386-405-0855			
	Daytime	Telephone number		
	legalboards@gmail.com			
	E-mail address: (to be us	sed 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 NAMI The name of the corpor		ons Inc.		
ARTICLE II PRIN	CIPAL OFFICE Principal street address	Mailing address, if different is:		
Port Orange, FL 32128	8	-		
			3	<u> </u>
ARTICLE III PURP The purpose for which	the corporation is organized is:	and all lawful reasons	715 DEC 3	ISIOH DE C
 -			<u> </u>	
			<u> </u>	
			2: 15	·
ARTICLE IV SHAR The number of shares o ARTICLE V INITI Name and Tit Address	f stock is: AL OFFICERS AND/OR DIRECTO Sylvia I. Craddock President	ORS Name and Title Address:	Robert Craddock Sectary 1704 Baron Ct Port Orange, FL 32128	
Name and Title	e:		•	
	e:			
A -1-1				

Name a	nd Title:	Name and Title:	
Addres	s	Address:	<u> </u>
			
	44441 - 4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-		
ARTICLE VI The name and I	REGISTERED AGENT Slorida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Robert Craddock		
Address:	1704 Baron Ct	_	
	Port Orange, FL 32128		SEC 2015
ARTICLE VII	INCORPORATOR	_	DEC DEC
The name and a	address of the Incorporator is:		30 - 30 - 30 - 30 - 30 - 30 - 30 - 30 -
Name:	Robert Craddock		300
Address:	1704 Baron Ct		2: 15
	Port Orange, FL 32128	_	
Effective date, i (If an effective filing.) Note: If the dat	date is listed, the date must be specific and can be inserted in this block does not meet the applicab	le statutory filing requirements, thi	·
the document's	effective date on the Department of State's record	s.	
	med as registered agent to accept service of processing am familiar with and accept the appointment as i		
) www		12/12/2016
1	Required Signature/Registered Agent	-	Date
I submit this do document to the	cument and affirm that the facts stated herein a Department of State constitutes a third degree fel	re true. I am aware that the false ony as provided for in s.817.155, F	information submitted in a
	Suu.		12/12/2016
Requ	fired Signature/Incorporator		Date