P20000022040

(Requestors Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2020 MAR 13 PM 2:51

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MAR 13 2020

2020 MAR 13 PM 2:12

COVER LETTER

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

SUBJECT: Planned Building 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: Carlos A. Gayman
Name (Printed or typed)

3700 SW 190th Ave
Address

Miramar FL 33029
City, State & Zip

(954) 868-1390
Daytime Telephone number

Professionals.contact@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)

ARTICLE I NAME
The name of the corporation shall be: Planned Building Solutions Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address: 2700 SW 190th Ave Miramar FL 33029

Mailing address, if different is: Same

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Hospitality and Healthcare solutions

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos A. Gavira President
Address: 2700 SW 190th Ave Miramar FL 33029

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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: Carlos A. Cayman

Address: 2700 SW 190th Ave

Miramar FL 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carlos A. Cayman

Address: 2700 SW 190th Ave

Miramar FL 33029

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of 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

Carlos Cayman
Required Signature/Registered Agent

3-12-2020
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.

Carlos Cayman
Required Signature/Incorporator

Date 3-12-2020