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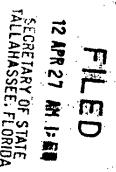
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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D. BRUCE

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EXAMINER

COVER LETTER

Registration Section Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

TO:

SUBJECT: SIGNIFY STUDIO INC.				
Name of Resulting Florida Profit Corporation				
The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to conve "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.	rt an			
Please return all correspondence concerning this matter to:				
JESS STERN CPA				
Contact Person				
JESS STERN CPA LLC				
Firm/Company				
11449 CHIPMUNK DRIVE				
Address				
BOCA RATON FL 33428				
City, State and Zip Code				
JSCPA58@AOL.COM	73			
E-mail address: (to be used for future annual report notification)	ÀP.			
For further information concerning this matter, please call:	27			
JESS STERN CPA at (561) 477-2390	3			
Name of Contact Person Area Code and Daytime Telephone Number	.			
Enclosed is a check for the following amount:				
□ \$105.00 Filing Fees and Certificate of Status □ \$113.75 Filing Fees and Cer				
STREET ADDRESS: MAILING ADDRESS:				
	Registration Section			
Division of Corporations Clifton Building Division of Corporations P. O. Box 6327				

Tallahassee, FL 32314

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
SIGNIFY STUDIO LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY LIQ 000027 (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)
on FEBRUARY 23,2012
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation
SIGNIFT STODIO INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.
7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

Page 1 of 2

currently organized, formed or incorporated.

Signed this	day of APRIL	, 20_12	
Individual s	ignature for Florida Profit Corporationing affirms that the facts stated in the felony as provided for in s.817.155,	nis document are true. Any false informa	ation constitutes
Signature of selected, an Printed Nan	f Chairman, Vice Chairman, Director, Concorporator: Incorporator: Title:	Officer, or, if Directors or Officers have INCORPORATOR	not been
Required Si stated in this s.817.155, F	ignature(s) on behalf of Other Busines is document are true. Any false information of S.S. [See below for required signature(s)	ss Entity: Individual(s) signing affirm(s) ation constitutes a third degree felony as a.]	provided for in
Signature: _	(In This Cop in: IFS STERN CPA	Title: ACCOUNTANT	,
Signature: _ Printed Nam	ne:	Title:	
Printed Nam	ne:	Title:	, -
Signature: _ Printed Nam	ne:	Title:	
Signature: _ Printed Nam	ne:	Title:	₹
Signature: _ Printed Nam	e:	Title:	12 APR
If Florida G Signature of	General Partnership or Limited Liabili One General Partner.	ity Partnership:	27 M ARY OF SSEE, F
	limited Partnership or Limited Liabili of <u>ALL</u> General Partners.	ty Limited Partnership:	D STATE FLORID
	imited Liability Company: a Member or Authorized Representative	e.	Þ
All others: Signature of	an authorized person.		
Fees Cert	ificate of Conversion: for Florida Articles of Incorporation: ified Copy: ificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

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

ARTICLE I	NAME			
The name of the co	proporation shall be: SIGNIF	Y STUDIO	INC	
ARTICLE II	PRINCIPAL OFFICE	. 0.0010	1140.	
111(11(11)	Principal street address	N	Mailing address, if di	fferent is:
3930 W.	Bay View Ave.			. revent is.
Tampa FL	. 33611			
ARTICLE III	DIIDDOCK			
	which the corporation is organized is:			
	the topolation is organized is.			
				TION
トしょう	RPROFIT	(C)RP	()RA	11() \(\cdot\)
. •				
ARTICLE IV	SHARES			
The number of share	res of stock is: 1000			
ADDICE D. II		mamono.		
ARTICLE V	INITIAL OFFICERS AND/OR DIR itle: NAOMI STERN VICE PRESIDENT, SECRETARY			
Address:	5481 Collins ave apt. 809		JARED LANTZMAN PRESI 1930 W Bay View Ave.	DENT, TREASURER
71441033.	Miami Beach, FL 33140		Tampa FL 33611	<u> </u>
				
N 100				
	itle:	Name and Title:		<u> </u>
Address:		Address: _		
		 -		
				<u> </u>
Name and Ti	itle:	Name and Title:_		
Address:				
		_	JESS STERN CPA LLC	<u> </u>
ARTICLE VI	REGISTERED AGENT			
	rida street address (P.O. Box NOT accep	table) of the registered agent	t is:	ARE 3
Name:	JESS STERN CPA LLC	 		A 2
Address:	11449 CHIPMUNK DRIVE			SS SS
	BOCA RATON FL 33428			
ARTICLE VII	INCORPORATOR			
	Iress of the Incorporator is:			
Name:	JESS STERN CPA LLC			≅≥ 2
Address:	11449 CHIPMUNK DRIVE			gmi 🙇
	BOCA RATON FL 33428	<u> </u>		
Havina haan nama	ed as registered agent to accept service o	f negaces for the above state	ad composation at th	a -lace designated in
this certificate. Lan	n familiar with and accept the appointme	r process for the above state nt as rooistored agent and ac	eu corporation at an aree to act in this ca	e piace aesignatea in macity
^ (n na regimeren ngern urm ng	gree to det in inis cu	pucuy
()	* / nn	4/25/12		
Réqui	red Signature/Registered Agent	Date		
// Requi	Tod Digitaturo Registered Agent	Daic		
l submit this docu	ment and affirm that the facts stated her	ein are true. I am aware th	hat any false inform	nation submitted in a
document to the De	epartment of State constitutes a third degr	ee felony as provided for in	s.817.155, F.S.	
(\)	Lann	AIDEIAD		
/ <i>U</i> / <i>U</i>		4/25/12		
// Require	ed Signature/Incorporator	Date		