

P-14000026435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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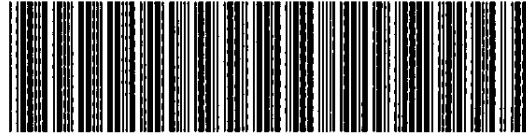
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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3/25/14

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Winston Weber & Associates, Inc.
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Susan Garbarino Hirsch
Contact Person

Winston Weber & Associates, Inc.
Firm/Company

5100 Poplar Avenue, Ste. 2700
Address

Memphis, TN 38137
City, State and Zip Code

Susan@winstonweber.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan G. Hirsch at (901) 834 5835 (Tu and Th)
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$105.00 Filing Fees

☐ \$113.75 Filing Fees
and Certificate of
Status

☐ \$113.75 Filing Fees
and Certified Copy

☒ \$122.50 Filing Fees,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Charter Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Charter Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 17 AM 10:17

This Certificate of Conversion **and attached Articles of Incorporation** 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:

Winston Weber & Associates, Inc.
Enter Name of Other Business Entity

2. The "Other Business Entity" is a S Corporation
(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 Tennessee
(Enter state, or if a non-U.S. entity, the name of the country)

on October, 1985
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:**

Winston Weber & Associates, Inc.
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 12/31/13
(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.)

Signed this 12 day of MARCH, 2014.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: [Signature]

Printed Name: Winston Weber Title: Chairman and CEO

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature] **NOT APPLICABLE**
Printed Name: WINSTON WEBER Title: CHAIRMAN & CEO

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of **ALL** General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$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 corporation shall be: Winston Weber & Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address
16502 Villespin de Avila
Tampa, FL 33613

Mailing address, if different is:
5100 Poplar Avenue
Suite 2700
Memphis, TN 38137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANAGEMENT CONSULTING TO RETAILERS AND
SUPPLIERS IN THE RETAIL INDUSTRY

ARTICLE IV SHARES

The number of shares of stock is: WINSTON WEBER OWNS 100%

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Winston Weber, President
Address: 16502 Villespin de Avila
Tampa, FL 33613

Name and Title: Linda Weber, Secretary
Address: 16502 Villespin de Avila
Tampa, FL 33613

Name and Title: Whitney Weber Thierauf, Director
Address: 5831 Monasas Run
Milford, OH 45150

Name and Title: Brant Weber, Director
Address: 9105 SW 137 Terrace
Miami, FL 33176

Name and Title: Paul Christman, Director
Address: 6441 A Nottingham
St Louis, MO 6309-2607

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Susan Garbarino (Hirsch)
Address: 3335 Greenacres Terrace
The Villages, FL 32163

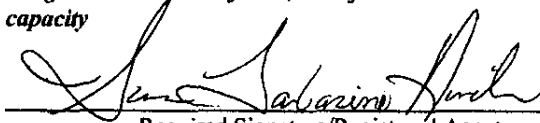
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STATE
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DIVISION OF CORPORATIONS
14 MAR 17 AM 10:17

ARTICLE VII - INCORPORATOR

The name and address of the Incorporator is:

Name: Winston Weber
Address: 16502 Villespin de Avila
Tampa, FL 33613

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

3/10/14
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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

3/12/14
Date