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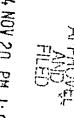
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SECHETARY OF STATE



174

## **COVER LETTER**

TO:	Charter Section Of C				
SUBJ	ECT:	Wee C	iallery	Inc.	
	<u></u>	Name of Resulti	ng Florida Profit C	orporation	
conve					nd fees are submitted to n" in accordance with
Please	e return all corr	espondence concerning	g this matter to	:	
	David	Pinto Contact Person		_	
		Contact Person			
	Wee	Gallery Firm/Company	Inc.	_	
		10th Ave	•		
	-	Address		_	
	St. Pe	tenburg FL ity, State and Zip Code	33701	_	
E	dave @	weeged/en	eport notification)	_	
For fu	rther informati	on concerning this ma	itter, please call	:	
1	avid Pint	tact Person	_at ( <u>727</u>	<u>) 48</u>	7804 Telephone Number
Enclo	,	for the following amou		ma Dayame	relephone Number
		of the following amor	are.		
<b>X</b> \$10	5.00 Filing Fees	☐\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Filin and Certified Co	ору (	3\$122.50 Filing Fees, Certified Copy, and Certificate of Status
New I Divisi Clifto 2661	Filings Section on of Corporat Building Executive Century 323	ions er Circle	New Divis P. O.	LING AD Filings Section of Cor Box 6327 massee, FL	ction porations



### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2014

DAVID PINTO 137 10TH AVE N ST. PETERSBURG, FL 33701

SUBJECT: WEE GALLERY LLC Ref. Number: W14000068038

We have received your document for WEE GALLERY LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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: 814A00024009

APPROVED-AND FILED

### Certificate of Conversion For

"Other Business Entity"

Into

Florida Profit Corporation

14 NOV 20 PM 1:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:
Wee Galley LLC 21400007763
Enter Name of Other Business Entity
2. The "Other Business Entity" is a 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 May 7 2014  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 <u>attached Articles of Incorporation:</u>
Enter Name of Florida Profit Corporation
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

	المهافد	PAUVEL
Signed this Hay of November	<u>, 20 /4</u> .	AND TED
Required Signature for Florida Profit Corporati	14 NOV 2	0 PM 1:00
Signature of Chairman, Vice Chairman, Director Cobeen selected, an Incorporator:  Printed Name: David Pinto Title:	Managing Director	PLORIDA
Required Signature(s) on behalf of Other Business signature(s).]	·	
Signature: Printed Name: Pavid Pint	Title: President	- -
Signature:Printed Name:	_Title:	- -
Signature:Printed Name:	_ Title:	<b>-</b>
Signature:Printed Name:	_ Title:	- -
Signature:		_
Signature: Printed Name:		
Signature:Printed Name:	Title:	<u>.</u>
If Florida General Partnership or Limited Liabilit Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		
Fees:  Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate 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. (Brofit) 20 PH 1:00

ARTICLE I NAME	Callan	Inc. SECRETARY OF STATE TALLAHASSEE, FLORIDA
The name of the corporation shall be:	Garrer	SECHETARY OF STATE
ARTICLE II PRINCIPAL OFFICE		COLLEGE CONTRACTOR CON
The principal place of business/mailing address is:		
Principal street address		Mailing address, if different is:
137 10th Ave N		
St. Petersburg FL 33701	w	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:		
For the design man	u factur	e and distribution
For the design man of consumer produce	-15.	
		·
ARTICLE IV SHARES		
The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS	
Name and Title: Surya Sajnani - CI		David Pinto . MO
<u> </u>		12-1-11
Address: 137 10th Are N		137 10th Area
St. Pete Fi 33701	<del>-</del> .	St. Pete FL 3371
Name and Title:	Name and Title:	
Address:	Address:	
	_	
Name and Title:	Name and Title:	
Address:	Address:	
	-	
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Box NOT acc	eptable) of the regist	ered agent is:
Name: David Pinto		
Name: David Pinto  Address: 137 10th Ave N		

APPKOVEL AND FILED

ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	4/ 1/01/ 00 01/ 1 00
	14 NOV 20 PH 1:00
Name: David Pinto	
1	SECRETARY OF STATE
Name: David Pinto  Address: 137 10th Ave N  St. Pete FL 33701	SECHETARY OF STATE TALLAHASSEE, FLORIDA
Auditos.	A SECTION STATEMENT OF SECTION
51. Pete FL 33701	
*****	*********
Having been named as registered agent to accept service of p	rocess for the above stated corporation at the place
designated in this certificate, I am familiar with and accept the ap	
	pointing as regulares agoin and agree to acres in
capacity	
$W/\sim 10^{-1}$	(1/4/14
Required Signature/Registered Agent	/ Data
	/ Date
	/ Date
I submit this document and affirm that the facts stated bereit	Date
I submit this document and affirm that the facts stated herein	are true. I am aware that any false information
I submit this document and affirm that the facts stated here's submitted in a document to the Department of State constitutes a	are true. I am aware that any false information third degree felony as provided for in s.817.155, F.S.
I submit this document and affirm that the facts stated here's submitted in a document to the Department of State constitutes a	n are true. I am aware that any false information third degree felony as provided for in s.817.155, F.S.
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submitted in a document to the Department of State constitutes a	are true. I am aware that any false information third degree felony as provided for in s.817.155, F.S.
I submit this document and affirm that the facts stated herein submitted in a document to the Department of State constitutes a Required Signature/Incorporator	a are true. I am aware that any false information third degree felony as provided for in s.817.155, F.S.  /// // Date
submitted in a document to the Department of State constitutes a	n are true. I am aware that any false information third degree felony as provided for in s.817.155, F.S.  /// / Date