

**2014 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000094939

**Entity Name:** SWEET DREAMS OF GAINESVILLE, INC.

**Current Principal Place of Business:**

3437 W UNIVERSITY AVE  
GAINESVILLE, FL 32607

**Current Mailing Address:**

3437 W UNIVERSITY AVE  
GAINESVILLE, FL 32607

**FEI Number:** 20-1306377

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MANFREDI, MICHAEL J  
3437 W UNIVERSITY AVE  
GAINESVILLE, FL 32607 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** MICHAEL J MANFREDI

12/18/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MANFREDI, MICHAEL J  
Address 3812 SW 15TH STREET  
City-State-Zip: GAINESVILLE FL 32608

Title V  
Name MANFREDI, LISA F  
Address 3812 SW 15TH STREET  
City-State-Zip: GAINESVILLE FL 32608

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL J MANFREDI

**PRESIDENT**

12/18/2014

Electronic Signature of Signing Officer/Director Detail

Date