

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000049325

Entity Name: MATTRESS BY APPOINTMENT LLC

Current Principal Place of Business:

324 6TH AVE. NORTH
JACKSONVILLE, FL 32250

Current Mailing Address:

324 6TH AVE. NORTH
JACKSONVILLE, FL 32250 US

FEI Number: 45-3622490

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONRAD, DARREN B
324 6TH AVE. NORTH
JACKSONVILLE, FL 32250 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name CONRAD, DARREN B
Address 324 6TH AVE. NORTH
City-State-Zip: JACKSONVILLE FL 32250

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DARREN CONRAD

MANAGER

04/18/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date