

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000049325

Entity Name: MATTRESS BY APPOINTMENT LLC

Current Principal Place of Business:

2817 ALASKAN WAY
JACKSONVILLE, FL 32226

Current Mailing Address:

2817 ALASKAN WAY
JACKSONVILLE, FL 32226 US

FEI Number: 45-3622490

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ERACLIDES GELMAN
4811 ATLANTIC BLVD.
JACKSONVILLE, FL 32207 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: MATTHEW WHIDDON

03/09/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER, AUTHORIZED MEMBER
Name SHOFFNER, CHARLES E
Address PO BOX 8560
City-State-Zip: GREENVILLE SC 29604-8560

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: CHARLES EDWIN SHOFFNER

MANAGING MEMBER

03/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date