

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000091827

Entity Name: MATTRESS DOCTOR L.L.C

Current Principal Place of Business:

2430 US HWY 27,
SUITE 330
CLERMONT, FL 34714

Current Mailing Address:

2430 US HWY 27
SUITE 330
CLERMONT, FL 34714 US

FEI Number: 82-1395943

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PEREZ, RENE
2430 US HWY 27
SUITE 330
CLERMONT, FL 34714 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: RENE PEREZ

02/08/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	FESSAL, WATKINS	Name	PEREZ, BALESKA
Address	729 DOWNING CIRCLE	Address	15616 STARLITE STREET
City-State-Zip:	DAVENPORT FL 33897	City-State-Zip:	CLERMONT FL 34714

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: BALESKA PEREZ

BUSINESS PARTER

02/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date