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COVER LETTER

•	•	
TO: New Filing Section Division of Corporations		
SUBJECT: Mattressman Ltd Com	oration	
Name of corporation - must include suffix		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to Tran "Certificate of Existence," or "Certificate of Good Standing" and check are a above referenced foreign corporation to transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
MATTHEW L. BELL, C.P.A.		
Name of Person		
BELL & VAN GRONDELLE CPA FIRM		
Firm/Company		
109 AMBERSWEET WAY, SUITE 401		
Address		
DAVENPORT, FLORIDA 33897		
City/State and Zip code		
INFO@BELLVANCPA.COM		
E-mail address: (to be used for future annual repor	rt notification)	
For further information concerning this matter, please call:		
MATTHEW L. BELL, C.P.A. at (863) 420-0499		
Name of Person Area Code & Daytime Tele	nhone Number	
STREET/COURIER ADDRESS: MAILING	ADDRESS:	
New Filing Section New Filing	New Filing Section	
Division of Corporations Division of	Division of Corporations	
	P.O. Box 6327	
	, FL 32314	
Tallahassee, FL 32301		
Enclosed is a check for the following amount:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & Certificate of Status Certified Copy	2 \$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	corporation; must include "INCORPORAT corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"		
(If name unavai	able in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida		
UNITED KING	DOM	3. 27-1902123		
	under the law of which it is incorporated)	(FEI number, if applicable)		
JANUARY 14	2004	5. PERPETUAL		
(Dat	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
MAY 1, 2010				
		97.1502, F.S., to determine penalty liability)		
·	N WAY, NORWICH, NORFOLK, NR7 (Principal office	9AJ, UNITED KINGDOM address) , FLORIDA 33897		
109 AMBERSV	N WAY, NORWICH, NORFOLK, NR7 (Principal office VEET WAY, SUITE 401, DAVENPORT (Current mailing BUSINESS INTERESTS.	9AJ, UNITED KINGDOM address) , FLORIDA 33897 address)		
109 AMBERSV	N WAY, NORWICH, NORFOLK, NR7 (Principal office VEET WAY, SUITE 401, DAVENPORT (Current mailing BUSINESS INTERESTS.	9AJ, UNITED KINGDOM address) , FLORIDA 33897 address)		
ANY AND ALL	N WAY, NORWICH, NORFOLK, NR7 (Principal office VEET WAY, SUITE 401, DAVENPORT (Current mailing BUSINESS INTERESTS.	9AJ, UNITED KINGDOM address) , FLORIDA 33897 address)		
ANY AND ALL	N WAY, NORWICH, NORFOLK, NR7 (Principal office VEET WAY, SUITE 401, DAVENPORT (Current mailing BUSINESS INTERESTS. s) of corporation authorized in home state of	9AJ, UNITED KINGDOM address) FLORIDA 33897 address) or country to be carried out in state of Florida) (P.O. Box NOT acceptable)		
ANY AND ALL (Purpose) Name and street	(Principal office (Principal office VEET WAY, SUITE 401, DAVENPORT (Current mailing BUSINESS INTERESTS. s) of corporation authorized in home state of the address of Florida registered agent: (9AJ, UNITED KINGDOM address) FLORIDA 33897 address) or country to be carried out in state of Florida) (P.O. Box NOT acceptable)		
ANY AND ALL (Purpose) Name and stree	Principal office (Principal office (Principal office (Principal office (Principal office (Principal office (Principal office (Current mailing	9AJ, UNITED KINGDOM address) FLORIDA 33897 address) or country to be carried out in state of Florida) (P.O. Box NOT acceptable)		

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

	5	芒薯
12. Nam	nes and business addresses of officers and/or directors:	
A. DIR	ECTORS	(939
Chairman	n: ANDREW KERRY	in G
Address:	UNIT 12A AVIAN WAY, NORWICH	
	NORFOLK, NR7 9AJ, UNITED KINGDOM	11/3
Vice Cha	irman:	
Address:		
Director:	BOB BRAZIER	
Address:	UNIT 12A AVIAN WAY, NORWICH	
	NORFOLK, NR7 9AJ, UNITED KINGDOM	
Director:		
Address:		
		
B. OFF	TICERS	
President	t	
Address:		
Vice Pres	sident:	
Address:		
		·····
Secretary	/:	
Address:		
Treasurer	r:	
Address:		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	(Signature of Director or Officer listed in number 12 of the application)	
14 BO	BBRAZIER Pres.	
17.	(Typed or printed name and capacity of person signing application)	



THE COMPANIES ACT 1985

Company No. 5015448

TALL AH SESET FI DE BANK

The Registrar of Companies for England and Wales hereby certifies that

MATTRESSMAN LTD

formerly called KERRYS UK LIMITED

which name was changed by special resolution was incorporated under the **Companies Act 1985**

as a limited company on the 14th January 2004 and that the certificate of incorporation altered to meet the circumstances of the case was issued on the 25th May 2004

Given at Companies House, Cardiff the 6th March 2008

S P HATTON for the Registrar of Companies

