7/19/2017

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023

Phone : (512)418-6949 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for further annual report mailings. Enter only one email address please. 🚍

mail	Address:	

FOREIGN PROFIT/NONPROFIT CORPORATION OMF Orlando, Inc.

Certificate of Status	0
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Page Count	06
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FAX COVER SHEET

TO		
COMPANY		
FAXNUMBER	18506176383	
FROM	Kimberly Laughrey	
DATE	2017-07-19 14:55:05 CST	
RE	OMF Orlando, Inc.	

COVER MESSAGE

Thank You,

Nicole Diffenbaugh Fulfillment Specialist CT Corporation

Team (614) 280-3338 GlobalFulfillmentTeam@wolterskluwer.com



1209 N Orange Street Wilmington, DE 19801 www.wolterskluwer.com

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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	OMF Orlando, Inc.			
30001		ame of corporation	n - must include suffix	
Dear Si	r or Madam:			
"Certifi	Mosed "Application by Forci leate of Existence," or "Cert referenced foreign corporation	ificate of Good Sta	r Authorization to Transact Business in Florida," and check are submitted to register the less in Florida.	
Please	return all correspondence co	ncerning this matte	er to the following:	
Sharon	Moy		·	
		Name of	f Person '	
Paul Ha	astings LEP			
		Firm/Cor	mpany	
71 S. W	facker Drive, 45th Floor			
		Addi	ress	
Chicag	o, IL 60606			
		City/State	and Zip code	
GTrzci	nski@originalmattress.com	<u> </u>		
	E-mail a	ddress: (to be used	for future annual report notification)	
For fur	ther information concerning	this matter, please	call:	
Sharon	Moy	312 at (499-6086	
	Name of Person	Area Co	ode Daytime Telephone Number -	
				,
	STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	cle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314	
Enclos	ed is a check for the following	ng amount:		
⊡ \$79		5 Filing Fee & ficate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy 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.

OMF Orlando, 1			· · · · · · · · · · · · · · · · · · ·	
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED,'	"COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate nar	ime	adopted for the purpose of transacting	business in Florida)
2. Delaware		3		
(State or country	y under the law of which it is incorporated)	i) .	(FEI number, if apple	icable)
(Date	of incorporation)	′'	(Date of duration, if other th	an perpetual)
upon registration				
	(Date first transacted busine (SEE SECTIONS 607-1501 & 60 436, Winter Park, Florida 32792	ess i 07 1	a Florida, if prior to registration) 502, F.S., to determine penalty liability)
7. 1783 State Road		inci	on) office address)	
	(111	i i i i c i j	on office address,	
	(Current m	naili	ng address, if different)	
	(0		,	
8 Name and stree	et address of Florida registered agent:	(P.	O. Box NOT acceptable)	<u> .</u>
	C T Corporation System		_ ,	<u>-</u> 2
Name:				· 信用
Office Address:	1200 South Pine Island Road		_	2 =
	Plantation		, Florida 33324 (Zip code)	
	(City)		(Zip code)	
				<u> </u>
Having been nan	ent's acceptance: ned as registered agent and to accept s s application, I hereby accept the appo	oin	ment as registered agent and agre	e to act in this capacity.
further agree to o	comply with the provisions of all status familiar with and accept the obligation	ues	relative to the proper and complet of my position as registered agent.	e performance of my
aunes, ana i am j	C T Corporati			
	0 4010		,,	
By:	Jan M. Hoj	ءا.	mes M. Halpin	
·-	Registe	crey	ımes M. Halpin —— Sisistant Secretary	

10. 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.

٠-:

To: Page 5 of 7

11. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman: See attached list.		name kapita sekandhiri sersia 11 s
Address:		
Vice Chairman:		
Address:		
Director:	have a material PA many a proper material Halffulm	 .
Address:		
Director:		
Address:		
B. OFFICERS	Basery decision	<u> </u>
President: See attached list.		
Address:		

Vice President:		7.,
Address:	5 m	
	<u> </u>	(=
Secretary:		20
Address:		•
	, -	
Treasuror:		- 53
Address:		i
NOTE: If necessary, you pray attack an addendum to the application listing additional off	icers and/or directors.	
12. Frequence for Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 11 above) affirm are true and that he or she is aware that false information submitted in a document to the D a third degree felony as provided for in s.817.155, F.S.	ns that the facts stated epartment of State co	i herein nstitutes
Gregory F. Trzeinski, President		
(Typed or printed name and capacity of person signing application	1)	

Attachment to State of Florida Application by Foreign Corporation for Authorization to Transact Business in Florida

OMF Orlando, Inc.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Name	Title	Address
Paul V. Terry	Director	1785 State Road 436 Winter Park, FL 32792
Gregory F. Trzcinski	Director	1785 State Road 436 Winter Park, FL 32792
Jayson Scott Knight	Director	1785 State Road 436 Winter Park, FL 32792

B. OFFICERS

Name	Title	Address
John Malloy	Secretary and Treasurer	1785 State Road 436 Winter Park, FL 32792
Gregory F. Trzcinski	President	1785 State Road 436 Winter Park, FL 32792
Patrick Knight	Vice President	1785 State Road 436 Winter Park, FL 32792
Jayson Scott Knight	Vice President	1785 State Road 436 Winter Park, FL 32792
Jason Mascari	Vice President	1785 State Road 436 Winter Park, FL 32792

17 T. 20 EHF 28

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "OMF ORLANDO, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

6481745 8300 SR# 20175316013 Authentication: 202913618

Date: 07-19-17

You may verify this certificate online at corp.delaware.gov/authver.shtml