

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Original Mattress Factory, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

John Malloy

Name of Person

The Original Mattress Factory, Inc.

Firm/Company

4930 State Road

Address

Cleveland, OH 44134

City/State and Zip code

Jmalloy@originalmattressfactory.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Malloy

216

661-8388

at ()

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$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.

The Original Mattress Factory, Inc.

1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 32-0537745 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/17/2017 5. (Date of incorporation) (Date of duration, if other than perpetual)

6. 01/01/2019 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4930 State Road, Cleveland, OH 44134 (Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Scott Knight

Office Address: 1785 State Road 436

Winter Park, Florida 32792 (City) (Zip code)

2019 FEB -4 PM 3: 24 FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

9. Registered agent's acceptance:

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.

[Signature] (Registered agent's signature)

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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Greg Trzcinski, Paul Terry, John Malloy, Scott Knight, Dave Choppa

Address: 4930 State Road, Cleveland, OH 44134

Director: _____

Address: _____

B. OFFICERS

President: Greg Trzcinski

Address: 4930 State Road, Cleveland, OH 44134

Vice President: Paul Terry, Andre Savelieff

Address: 4930 State Road, Cleveland, OH 44134

Secretary: John Malloy

Address: 4930 State Road, Cleveland, OH 44134

Treasurer: John Malloy

Address: 4930 State Road, Cleveland, OH 44134

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. John Malloy, Secretary & Treasurer

(Typed or printed name and capacity of person signing application)

FILED
2019 FEB -4 PM 3:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Delaware


Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE ORIGINAL MATTRESS FACTORY, 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 FOURTEENTH DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE ORIGINAL MATTRESS FACTORY, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF JULY, A.D. 2017.




Jeffrey W. Bullock, Secretary of State

6481814 8300

SR# 20190105234

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

Authentication: 202074912

Date: 01-14-19