F3352

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(Only/Oldfo/Elp/ Holle II)			
PICK-UP WAIT MAIL			
4			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





700138723807

12/12/08--01019--002 **70.00

R.A. Change
TB 12-12-08

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: REGAL MATTRESS CO., INC. (Name of Cor	poration)
DOCU	UMENT NUMBER: F33521	
The en	closed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to	o the following:
	JAMES THOMA (Name of Conta	AS SAUNDERS act Person)
	REGAL_MATTR	RESS CO., INC.
	2003 VISCO	DUNT ROW ss)
	ORLANDO, FLO (City/State and	RIDA 32809-6221 Zip Code)
For fu	rther information concerning this matter, please cal	II:
 ,	James Thomas Saunders (Name of Contact Person)	at (407) 331-8233 (Area Code & Daytime Telephone Number)
Enclos	sed is a \$35.00 check made payable to the Departm	ent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta ange is submitted for a corporation organized under the laws of the State of Fl er to change its registered office or registered agent, or both, in the State of Flo	orida			
1. The name of	the corporation: Regal Mattress Co., Inc.	·			
2. The principal	2. The principal office address: 2003 Viscount Row, Orlando, Florida 32809-6221				
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 5/05/1981 Document number: F33521				
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the			
	James D. Saunders				
	2003 Viscount Row	2			
	Orlando, Florida 32809-6221	BBD SECI			
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offic	SSE SSE			
	James Thomas Saunders	PH 2			
	2003 Viscount Row (P.O. Box NOT acceptable)	2: 47 STATE FLORIDA			
	Orlando, Florida 32809-6221				
	ess of its registered office and the street address of the business office of its I be identical.				
Such change wauthorized by t	as authorized by resolution duly adopted by its board of directors or by an o hetboard, or the corporation has been notified in writing of the change.	officer so			
WW. (Signat	James D. Saunder (Printed or typed name and titl	ers ©			
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp nd I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby s began notified in writing of this change.	plete performance agent. Or, if this confirm that the			
	12-9-08				
	Ignature 6f Registered Agent) (Date)				
11 Signing on be	ehalf of an entity:				
23MAC	Typed or Printed Name)				
	* * * FILING FEE; \$35.00 * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)