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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: HUBCO

Account Number : 104662003400

Phone

: (516)935-3940

Fax Number

: (516)935-3088

## LIMITED LIABILITY COMPANY

## Mattress Capital, LLC

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92
\$130,00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name The name of the Limited Liability Company is:	Mattress Capital, LLC
ARTICLE II - Address The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
108 Skyflower Circle	108 Skyflower Circle
Daytona Beach, FL 32117	Daytona Beach, FL 32117
The name and Florida street address of the regi	egistered Office & Registered Agent's Signature stered agent are: Dale J. Abbott, CPA
- · · · · · · · · · · · · · · · · · · ·	Name
5	55 W. Granada Boulevard, Suite E-9
	(P.O. Box or Mail Drop Box NOT Acceptable)
<u></u>	Drmond Beach, FL 32174
	(City/State/Zip)
at the place designated in this certificate, I lead capacity. I further agree to comply with the	to accept service of process for the above stated limited liability combany hereby accept the appointment as registered agent and agree to act limits provisions of all statutes relating to the proper and complete performance cept the obligations of my position as registered agent as provided for in
Registered	Agent's Signature - Dale J. Abbot, CPA

4. \$ ; \$ { ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR"=Manager "MGRM"=Managing Member	Name and Address:
MGRM	David Levin-108 Skyflower Circle, Daytona Beach, FL 32117
MGRM	Christy Levin-108 Skyflower Circle, Daytona Beach, FL 32117
(Use attachment if necessary)  REQUIRED SIGNATURE:	

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**David Levin** 

Typed or printed name of signee

