109000049583

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(,,,
(Document Number)
(Boother Namber)
Ontified Coding
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
780121101 1071
789 6461 671

Office Use Only

W9-19193 W9-49583



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04/22/09--01039--013 **155.00



M. THOMAS

MAY 2 1 2009

EXAMINED

COVER LETTER

TO: Registration : Division of C					
SUBJECT: Mattre	ess Queen LLC (Name of Resulting	; Florid	a Limited (Company	*
	isiness Entity" into a "				, and fees are submitted to lity Company" in
Please return all corr	espondence concernin	g this	matter to	:	
Lourdes Arredondo				_	
	(Contact Person)				
SoBe Consulting Servi	· · · · · · · · · · · · · · · · · · ·				حبير
	(Firm/Company)				30 E 71
2895-A Collins Ave					
	(Address)				
Miami Beach, Fl. 3314	.0				This MAY 20 PH 2:27
	City, State and Zip Code)			_	
For further informati	on concerning this ma	tter, p	lease cal	:	1000年後、1
Lourdes Arredondo		at (_	78ñ	348-	1167
(Name of Conta	et Person)		(Area Co	de and Da	aytime Telephone Number)
Enclosed is a check t	or the following amou	ınt:			
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status		180.00 Fili Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:		MAI	LING A	ADDRESS:
Registration Section					Section
Division of Corporati	ions		Divis	ion of C	Corporations
Clifton Building	o			Box 63:	
2661 Executive Cent	er Circle		Talla	iassee,	FL, 32314

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 23, 2009

LOURDES ARREDONDO 2895-A COLLINS AVE. MIAMI BEACH, FL 33140

SUBJECT: MATTRESS QUEEN LLC

Ref. Number: W09000019193



We have received your document for MATTRESS QUEEN LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 509A00013697

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

(Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
. The "Other Business Entity" is a Incorporation
(Enter entity type. Example: corporation, limited partnership, sole proprietorship,
general partnership, common law or business trust, etc.)
Equation but the sample common terr or business transferences
rst organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)
n <u>01/14/2008</u>
(Enter date "Other Business Entity" was first organized, formed or incorporated)
. If the jurisdiction of the "Other Business Entity" was changed, the state or country
nder the laws of which it is now organized, formed or incorporated:
·
The name of the Florida Limited Liability Company as set forth in the attached
rticles of Organization:
lattress Queen LLC
(Enter Name of Florida Limited Liability Company)
If not effective on the date of filing, enter the effective date:
<u> </u>
The effective date: 1) cannot be prior to nor more than 90 days after the date this
becoment is filed by the Florida Department of State; AND 2) must be the same as the factive data listed in the attached Articles of Organization if an effective data is
Tective date listed in the attached Articles of Organization, if an effective date is

Signed this 15 day of April	20 09
Signature of Member or Authorized Representa	ative of Limited Liability Company:
Signature of Member or Authorized Representativ Printed Name: Marisela Roca	r: X Galdent
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: X HOGERPOR Printed Name: MARISELA ROLA	
Printed Name: MARISELA KOLA	Title: Manager
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	_ Title:
Signature:	
Printed Name:	Title:
Signature:	FIG. P.
Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc	
If Directors of Officers have not been selected, an in-	corporator must sign.
If Florida Ceneral Partnership or Limited Liabili Signature of one General Partner.	iy Parinershin:
Signature of one General Patther.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership;
Signatures of ALL General Faitners.	
All others: Signature of an authorized person.	
Fees:	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Comp	any is:
Mattress Queen LLC	9
(Must end with the words "Limited Liability Company "LLC.")	," the abbreviation "L.L.C.," or the designation
ARTICLE II - Address:	
The mailing address and street address of	f the principal office of the Limited
Liability Company is:	2
	52 5
Principal Office Address:	Mailing Address: 154 W 29 St 208 A
154 W 29 St	154 W 29 St 20
Hialeah, FL 33012	Hialeah, FL 33012
ARTICLE III - Registered Agent, Reg Signature: (The Limited Liability Company cannot serve as its ovindividual or another	istered Office, & Registered Agent 2
business entity with an active Florida registration.)	
The name and the Florida street address of	of the registered agent are:
SoBe Consulting Ser	vices LLC
	Name
2895-A Collins Ave	

Miami Boach, F1, 33140

City, State, and Zip

Florida street address (P.O. Box **NOT** acceptable)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

"MGRM" = Managing Member	
MGR	Marisela Roca
	154 W 29 Street
	Hialeah, FL 33012
	
	73: 1
	<u> </u>
	0.7
.E.V: Effective date, if other than	the date of filing: (OPTIONAL)
nt is filed by the Florida Depart	
ective date: 1) cannot be prior t nt is filed by the Florida Depart ctive date listed in the attached	(OPTIONAL) to nor more than 90 days after the date this ment of State; <u>AND</u> 2) must be the same as
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ective date: 1) cannot be prior to the is filed by the Florida Depart clive date listed in the attached sted therein.) REQUIRED SIGNATURE: Signature of a member or an (In accordance with section 66)	(OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as I Certificate of Conversion, if an effective authorized representative of a member. 08.408(3), Florida Statutes, the execution
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of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2