

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L97000000973

FILED
Jan 14, 2008
Secretary of State

Entity Name: MURPHY BED PRODUCTS, LC

Current Principal Place of Business:

10940 US 1 NORTH
ST. AUGUSTINE, FL 32095

New Principal Place of Business:

10940 US 1 NORTH
PONTE VEDRA, FL 32081

Current Mailing Address:

10940 US 1 NORTH
ST. AUGUSTINE, FL 32095

New Mailing Address:

10940 US 1 NORTH
PONTE VEDRA, FL 32081

FEI Number: 59-3589344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHULTZ, DONALD P
10940 US HWY #1N
SAINT AUGUSTINE, FL 32081 US

Name and Address of New Registered Agent:

SCHULTZ, DONALD P
10940 US HWY #1N
PONTE VEDRA, FL 32081 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DONALD P. SCHULTZ

01/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DONALD, SCHULTZ P
Address: 6370-1 US HWY #1N
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: MVP () Delete
Name: SCHULTZ, VALORI F
Address: 10940 US HWY #1N
City-St-Zip: SAINT AUGUSTINE, FL 32081

Title: MVP () Delete
Name: SCHULTZ, TODD P
Address: 10940 US HWY #1N
City-St-Zip: SAINT AUGUSTINE, FL 32081

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DONALD, SCHULTZ P
Address: 10940 U.S. HWY #1 N
City-St-Zip: PONTE VEDRA, FL 32081

Title: MVP (X) Change () Addition
Name: SCHULTZ, VALORI F
Address: 10940 US HWY #1N
City-St-Zip: PONTE VEDRA, FL 32081

Title: MVP (X) Change () Addition
Name: SCHULTZ, TODD P
Address: 10940 US HWY #1N
City-St-Zip: PONTE VEDRA, FL 32081

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DONALD P. SCHULTZ

MGR

01/14/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date