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(Re	questor's Name)							
(Ad	dress)							
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Jonathan Castro jonathan.castro@cscqlobal.com

Date: March 5, 2019

Order#: 645506-264

Re: TOMORROW SLEEP LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Jonathan Castro c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

(41)	3560 Lenox Road Suite 1100	(t	3560	Lenox Road Sui	te 1100		
. ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		Mailing address of (Note: MAY Bi		-	
	Atlanta, GA 30326		Atlanta	a, GA 30326	•		
	03/08/2017		M17000	0001986			
	Date of filing/registration in Florida	4.		Document nur	nber		
(4)	C T CORPORATION SYSTEM						
(a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of St	—- tate:			
			·				
	1200 SOUTH PINE ISLAND ROAD	ADDRES	·				
	Registered Office Address (MUST_BE FLORIDA STREET	<u>addike.sa</u>	<i>u</i>			201	
					:	2019 MAR	
	PLANTATION FI	3332/	ı			25	<u></u>
	.11			_		-7	j.===
(b)	Corporation Service Company				ζ/, ε <u>τ.,</u> ΠΩ =π	PH	H
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		मिक		
					125	ယ	
	1201 Hays Street				EΠ	ယ	
	NEW Registered Office Address:						
	NEW Registered Office Address:						
	NEW Registered Office Address:			_			
	NEW Registered Office Address:			_			

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Printed or typed name of signee

Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Asst. Vice President

Signature of a member or authorized representative of a member