POJOOOJJ 608

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: _

LOOOO4865711--7 -02/05/02--01015--005 *****78.75 ******78.75

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Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:	 7	
• □ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM:	American Account Name (ting Associates (Printed or typed)	, Inc.		
	Address Stuart, FL 34994 City, State & Zip			02 JAN	
				02 JAN 30 PH 4: 38	
	561-286-7005 Daytime T	elephone number	ORIDA	TATE	·

SUPERIOR SLEEP SYSTEMS, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

NOTE: Please provide the original and one copy of the articles.

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.ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Superior Sleep Systems, Inc.

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TALLANISSEE, FLORIDA

TALLANISSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7986 SE Trenton Ave. Hobe Sound, FL 33455

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Retail Sales & Marketing

ARTICLE IV SHARES

The number of shares of stock is: 100 Shares of Common Stock

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Darlene Riess, President 7986 SE Trenton Ave. Hobe Sound, FL 33455

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Darlene Riess 7986 SE Trenton Ave. Hobe Sound, FL 33455

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Darlene Riess 7986 SE Trenton Ave. Hobe Sound, FL 33455

Signature/Registered Agent

Date

Jate

1-25-02

Signature/Incorporator

Date