

TRANSMITTAL LETTER

P02000045658

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
02 APR 22 AM 10:33

SUBJECT: MATTRESS AND FURNITURE OUTLET INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: ALBERT M SAINELLA <sup>AND</sup> JIMMY J BISSETT  
Name (Printed or typed)

219 LEE ST.  
Address

OLDSMAR, FL 34677  
City, State & Zip

813-855-4679  
Daytime Telephone number

500005313255--6  
-04/22/02--01062--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

# 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: **MATTRESS AND FURNITURE OUTLET INC.**

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: **219 LEE ST.  
OLDSMAR, FL 34677**

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

## ARTICLE IV SHARES

The number of shares of stock is:

**100 SHARES** **ALBERT M. SAGNELLA** **50 Shares** **JIMMY J. BISSETT** **50 Shares**

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

**ALBERT M. SAGNELLA (OWNER)**  
**1402 OVERLEA DR.**  
**DUNEDIN, FL 34698**

**JIMMY J. BISSETT (OWNER)**  
**219 LEE ST.**  
**OLDSMAR, FL 34677**

## ARTICLE VI REGISTERED AGENT

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

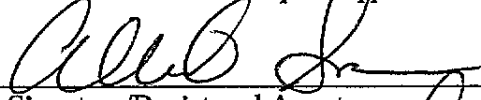
**ALBERT M. SAGNELLA**  
**1402 OVERLEA DR**  
**DUNEDIN, FL 34698**

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**ALBERT M. SAGNELLA**  
**1402 OVERLEA DR**  
**DUNEDIN, FL 34698**

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
Signature/Registered Agent

**4/19/02**  
Date

  
Signature/Incorporator

**4/19/02**  
Date

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
02 APR 22 AM 10:30