

P03000037569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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AUTHORIZATION BY PHONE TO

CORRECT

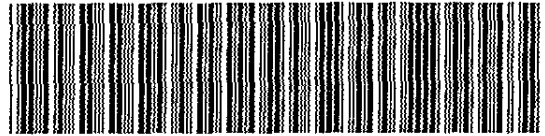
DATE

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corp suffix ART IV-VI

04-03-03

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W03-9412
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TRANSMITTAL LETTER

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

SUBJECT: MATTRESS CENTER corporation
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Billie R. Ison
Name (Printed or typed)

6629 Love LN
Address

Leesburg, FL 34748
City, State & Zip

(352) 326-2616
Daytime Telephone number

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 CENTER Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2082 County Rd 48
BUSHNELL FL 33513

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Form my Business Company

ARTICLE IV SHARES

The number of shares of stock is:

one

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

Billie R. Ison
6629 Love Lane
Leesburg FL 34748

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Billie R. Ison
6629 Love LN
Leesburg FL 34748

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

Billie R. Ison
Signature/Registered Agent

3-24-03
Date

Billie R. Ison
Billie R. Ison
Signature/Incorporator

3-24-03
Date