

P04000122624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

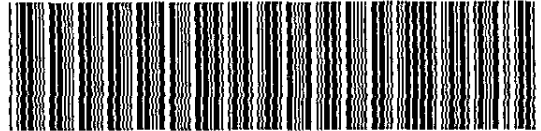
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12.20.05



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FILED
05 DEC 20 AM 10:00
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Sleep Tite Mattress Corp.

DOCUMENT NUMBER: P04000122624

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diter D. Hernandez

(Name of Contact Person)

Sleep Tite Mattress Corp.

(Firm/ Company)

2935 Victoria Drive

(Address)

Kissimmee, FL 34746

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Taiz C. Perozo

(Name of Contact Person)

at (407) 944-9369

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 28, 2005

SLEEP TITE MATTRESS CORP.
% DITER D. HERNANDEZ
2935 VICTORIA DRIVE
KISSIMMEE, FL 34746

SUBJECT: SLEEP TITE MATTRESS CORP.
Ref. Number: P04000122624

We have received your document for SLEEP TITE MATTRESS CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 105A00069267



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

November 9, 2005

DITER D. HERNANDEZ
SLEEP TITE MATTRESS CORP.
2935 VICTORIA DRIVE
KISSIMMEE, FL 34748

SUBJECT: SLEEP TITE MATTRESS CORP.
Ref. Number: P04000122624

We have received your document for SLEEP TITE MATTRESS CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Article number IV refers to the incorporator, see the enclosed original aArticles of Amendments. And please advise if you wish to change all the addresses to 2935 Victoria Drive.

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 205A00066955

Articles of Amendment
to
Articles of Incorporation
of

SLEEP TITE MATTRESS CORP.

(Name of corporation as currently filed with the Florida Dept. of State)

FILED
05 DEC 20 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P04000122624

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

N / A

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

APPLICABLE CHANGES TO ARTICLES V AND VII;

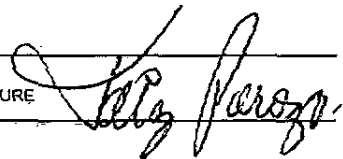
ARTICLE V: THE NAME AND FLORIDA STREET ADDRESS OF THE NEW REGISTERED

AGENT IS TAIZ C. PEROZO, 2935 VICTORIA DRIVE, KISSIMMEE, FL 34746

I TAIZ C. PEROZO, CERTIFY THAT I AM FAMILIAR WITH AND ACCEPT

THE RESPONSIBILITIES OF REGISTERED AGENT.

REGISTERED AGENT SIGNATURE



ARTICLE VII: THE NAME OF THE NEW TREASURER IS TAIZ C. PEROZO

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

N / A

(continued)

The date of each amendment(s) adoption: NOVEMBER 01, 2005

Effective date if applicable: NOVEMBER 01, 2005
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by
_____"
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature Diter H.
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DITER D. HERNANDEZ
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILING FEE: \$35