P05000060163

2005 SEP 12 ANTONS

| (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: | | | |
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Office Use Only



400059056704

097)2705--01038--023 **35,00

Amend.

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF | CORPORATION: MAGIC MATTR | ESS INC | |
|-----------------|--|---|---|
| DOCUMEN | T NUMBER: P05000060163 | | |
| The enclosed | Articles of Amendment and fee a | re submitted for filing. | |
| Please return | all correspondence concerning thi | s matter to the following: | |
| | JOSE ABELLA | | |
| | (Name o | of Contact Person) | |
| | MASTER TAX SERVICE INC | | |
| | (Fir | m/Company) | |
| | 3846 CURRY FORD RD | | |
| | | (Address) | |
| | ORLANDO, FL 32806 | | |
| | (City/ St | tate/ and Zip Code) | |
| For further in | nformation concerning this matter, | please call: | |
| JOSE ABELL | A | at (407) 896-7113 | |
| | (Name of Contact Person) | (Area Code & Daytime | Telephone Number) |
| Enclosed is | a check for the following amount: | | |
| Ø \$35 Filing F | Tee ☐ \$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 | Amendment Section Division of Corpore 409 E. Gaines Street Tallahassee, FL 32 | rations et |

SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Amendment Articles of Incorporation of

2005 SEP 12 AM 10: 47

| MAGIC MATTRESS INC | |
|---|---|
| (Name of corporation as currently filed with the | ne Florida Dept. of State) |
| P05000060163 | |
| (Document number of corporation | n (if known) |
| ursuant to the provisions of section 607.1006, Florida Statu dopts the following amendment(s) to its Articles of Incorpo | |
| YEW CORPORATE NAME (if changing): | |
| Must contain the word "corporation," "company," or "incorporated" or t A professional corporation must contain the word "chartered", "professi | the abbreviation "Corp.," "Inc.," or "Co.") ional association," or the abbreviation "P.A.") |
| MENDMENTS ADOPTED - (OTHER THAN NAME Cond/or Article Title(s) being amended, added or deleted: (BE | |
| RTICLE VII: DELETED: MAIDA M HERNANDEZ VP | ADDED:HUMBERTO C CRUZ VP |
| 3191 WHOOPING CRANE RUN | 8900 BRACKENWOOD DR |
| KISSIMMEE, FL 34741 | ORLANDO, FL 32829 |
| | |
| | |
| | |
| | |
| | |
| (Aug. 1 - 17); 1 - 10 | |
| (Attach additional pages if ne | |
| f an amendment provides for exchange, reclassification, or or implementing the amendment if not contained in the ame | |
| | |
| | |

(continued)

| •The date of each amendment(s) adoption: 08/31/2005 |
|---|
| Effective date if applicable: 08/31/2005 |
| (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. |
| Signed this 31ST day of AUGUST 2005 |
| Signature (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) |
| MECEDES CRUZ |
| (Typed or printed name of person signing) |
| PRESIDENT |
| (Title of person signing) |

FILING FEE: \$35