2008 FOR PROFIT CORPORATION

FILED May 16, 2008 8:00 am Secretary of State 04-10-2008 90014 012 ***150.00

	Allitona				_		•	
DOCUMENT # P07000108235 1. Entity Name SUNSHINE MATTRESS CLEANING, INC.						04-10-20	008 90014 012 *	·**150.00
Principal Plac	e of Business	Mailing Address						
2298 NE 3 CT 2298 NE 3 CT					000	10711		
BOCA RATON, FL 33431 BOCA RATON, FL 33431				b bu	TALTE			
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Principal Place of Business - No P.O. Box # 3. Mailing Address				116866991	f Danii irani kani arii kan	ET CY û te ûû (û) fûntû libbûn tikût û	(TEE) # (177)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03192008	Chg-P	CR2E034 (12/06)		
City & State		City & State		4. FEI Numb	25477 O	·	oplied For ot Applicable	
Zip	Country Zip Co.		Cour	Ty 5 Cartificate of Status Desired \$8:75 Additional				
					<u> </u>		Fee Require	
	5. Name and Address of Current	7. Name and Address of New Registered Agent						
MIIDDAY	GRAHAM			Name				
MURRAY, GRAHAM 2298 NE 3 CT				Street Address (P.O. Box Number is Not Acceptable)				
BOCA RATON, FL 33431								
				City			FL Zip Cod	e
				<u> </u>	,			
 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 								
in varigeness of registered against								
SIGNATURE								
<u> </u>	- I special sp	and the supplement of the supp		- The second				
	E NOW!!! FEE IS \$150.00	9. Election Campa Trust Fund Cont			.00 May Be Sed to Fees			
Atter M	ay 1, 2008 Fee will be \$550.	11831 15110 5011	HOODGI.	ے میں	760 IO 1 662			
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFFI	CERS AND DIRECTOR	S IN 11
TIPLE	DP	🔲 Delete	THIL	E			Change	☐ Addition
NAME	MURRAY, GRAHAM		NAM	E				
STREET ADDRESS	2298 NE 3 CT			ET ADDRESS				
CITY-SI-2IP	BOCA RATON, FL 33431		CITY	-SI-ZIP				
TITLE		☐ Delet a	TITL				Change	Addition
HAME	·		NAM	- 1				
STREET ADDRESS				ET ADORESS -SI-ZIP				
CITY-ST-ZIP			-					
TITLE		☐ Delete	TITL	· •			Change	☐ Addition
NAME STREET ADORESS			NAM S100	ET ADDRESS				
CITY-ST-ZIP				-SI-ZP				
TITLE		☐ Defete	1811	···			☐ Change	Addition
HAME		La neicià	NAM	· •			T. Outlide	
STREET ADDRESS				ET ADDRESS				Í
CITY-ST-ZIP				-ST-ZIP				
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NAME			HAM	£			'	
			STRE	ET ADDRESS			•	
STREET ADORESS	1			ŀ				
STREET ADDRESS CITY-ST-ZIP			CITY	-SI-ZP				
CITY-ST-ZIP	certify that the information supplied with	this bling does not quality to	r the ex	emptions contained	d in Chapter 119	, Florida Statutes. 11	further certify that the in	nformation
12. I hereby indicated of the col	f on this report or supplemental report is rporation or the receiver or trustee emp	strue and accurate and that re owered to execute this report	or the exi ny signa as requi	emptions contained ture shall have the	same legal effec	t as if made under o	ath; that I am an officer	or director
12. I hereby indicated of the col	l on this report or supplemental report is	strue and accurate and that re owered to execute this report	or the ex- my signal as requi	emptions contained fure shall have the red by Chapter 601	same legal effec 7, Florida Statute	it as if made under o is; and that my name	ath; that I am an officer appears in Block 10 or	or director