P110000053348

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Do	ocument Number)			
•	ŕ			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

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COVER LETTER

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

SUBJECT: Seb Mattress Corp			
(PROPOSED CORPORAT	FE NAME – MUST INC	LUDE SUFFIX)	_
Enclosed are an original and one (1) copy of the article \$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	•
FROM: Oscar E Vera	(Printed or typed)		
3585 SW 13 Terrace			
	ddress	≯ «	2011 JUN
Miami, Florida 33145	1. 4. 0. 22		E !
•	State & Zip	199	5 1
<u>305-926-9089</u>			P : 1
	lephone number		1 2: 30
sebmattress@yahoo.com E-mail address: (to be used	E- C -		Ö
E-mail address: (to be used	for future annual report	notification)	

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 The name of the	NAME SEB mattress Corcorporation shall be:	p.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		ddress, if different is:
	3585 SW 13 Terrce		
	Miami, Florida 33145		
ARTICLE III	PURPOSE		
	which the corporation is organized is:		
	ping products such as mattresses	s, sheets, and pillows. In a	eneral all kind of items
	good night sleep.	, , ,	
, 0.0.0	goodg c.cop.		
		**.	
ARTICLE IV			
The number of si	hares of stock is:1000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRE	CTORS	
Name and	Title:Oscar E Vera	Name and Title:	
Address:	3585 SW 13 Terrace	Address:	
	Miami, Florida 33145		
	President		
Name and	Title:Victor E Jimenez	Name and Title:	
Address:	1473 SE 20 Road	Address	
Audiess.	1473 SE 20 Road Homestead, Florida 33035	Addiess.	
	Vice-President		
	· · · · · · · · · · · · · · · · · · ·	-	
Name and Address:	Title:	4 1 1	
Address:	-	Address:	
			
450000			
	REGISTERED AGENT	11. 64	
Name:	lorida street address (P.O. Box NOT accept Oscar E Vera	able) of the registered agent is:	5 20
Address:	3585 SW 13 Terrace		
7 tuur 033.	Miami, Florida 33145		>
			
	INCORPORATOR		6 6
	ddress of the Incorporator is:		Mac to the
Name:	Victor F Jimenez	<u></u>	
Address:	1473 SE 20 Road		gi N
	Homestead, Florida 33035		2. 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.
Having been nai	ned as registered agent to accept service of	process for the above stated corna	
this certificate, I	am familiar with and accept the appointment	as registered agent and agree to a	ct in this capacity
	-11 W/18 / C	_	
	(Wit)	>	05/26/2011
	Required Signature/Registered Age	nt	Date
I submit this do	cument and affirm that the facts stated here	alu ana tura I am the cot	Calle a traffic and a second s
document to the	Department of State constitutes of Wird degree	m we true. I am aware that the j e felony as provided for in s.817.15	juse injormation submitted in a 5, F.S.
	V _//		
	1	_	05/26/2011
	Required Signature/Incorporator		Date