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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA PROFIT/NON PROFIT CORPORATION
Maylin Bedding Corp.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

DIVISION OF CORPORATIONS

RECEIVED
11 SEP 30 AM 8:19

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DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

11 SEP 30 AM 9:53

ARTICLE I NAME
The name of the corporation shall be: Maylin Bedding Corp.

ARTICLE II PRINCIPAL OFFICE
Principal street address
2655 West 76th Street
Hialeah Fl 33016

Mailing address, if different is:
2655 West 76th Street
Hialeah Fl 33016

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Any Activity or business permitted under the laws of the United States and the State of Florida

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Nelson J Chavez President</u>	Name and Title: _____
Address: <u>2655 West 76th Street</u>	Address: _____
<u>Hialeah Fl 33016</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Nelson J Chavez
Address: 2655 West 76th Street
Hialeah Fl 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nelson J Chavez
Address: 2655 West 76th St
Hialeah Fl 33016

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

Nelson J Chavez

Required Signature/Registered Agent

09/29/11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §817.155, F.S.

Nelson J Chavez

Required Signature/Incorporator

9/29/11

Date

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