

FEB/03/2016/WED 01:25 PM

2/3/2016

FAX No.

P. 001/003

P16000011205

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H16000028428 3)))



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Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
GLOBAL MATTRESS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED
16 FEB -3 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
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Corporate Filing Menu

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FAX No.

P. 002/003

FILED

ARTICLES OF INCORPORATION

16 FEB -3 PM 12:07

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

ARTICLE I NAME

The name of the corporation shall be: GLOBAL MATTRESS, INC.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7601 NW 68TH ST

51 E 50 PL

MIAMI, FL 33166

MIAMI, FL 33013

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

SHARES: 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOCELYN GOMEZ (P)

Name and Title: _____

Address 51 E 50 PL

Address: _____

HIALEAH, FL 33013

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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FAX No.

P. 003/003

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: JOCELYN GOMEZ

Address: 51 E 50 PL

HIALEAH, FL 33013

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOCELYN GOMEZ

Address: 51 E 50 PL

HIALEAH, FL 33013

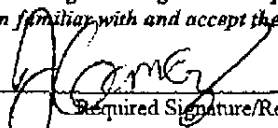
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

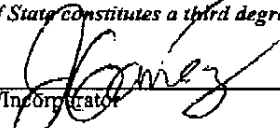


Required Signature/Registered Agent

02/01/2016

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 s.817.155, F.S.



Required Signature/Incorporator

02/01/2016

Date

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TALLAHASSEE FLORIDA