

TRANSMITTAL LETTER

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(Proposed corporate name - must include suffix)

Additional Copy Required

Name (printed or typed)

Address

City, State & Zip

Daytime Telephone number

FILED
SEP - 8 PM 5:15
STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED

85 SEP -8 PM 5:16

CLERK OF COURT
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

AMERICAN FURNITURE + MATTRESS WHOLESALERS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1230 S. MILITARY TRAIL
W.P.B. FL. 33415

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

STEVEN PAUL ERSON
9698 ARBOR OATS LN. #102
BOCA RATON FL. 33428

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

STEVEN DAUL EYSON
9698 ARBOA OAKS LN #102
BOCA RATON FL. 33428

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29 day of AUGUST, 19 95.



Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: AMERICAN FURNITURE + MATTRESS WHOLESALES
INC.
2. The name and address of the registered agent and office is:

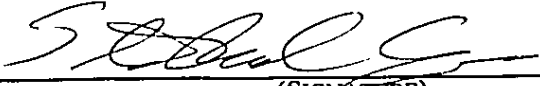
STEVEN PAUL ERSON
(NAME)

9698 ARBOR OAKS LN. #102
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BOCA RATON FL 33428
(CITY/STATE/ZIP)

FILED
SEP-8 11:51 AM '95
TALLAHASSEE, FL

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

8/29/95
(DATE)