Law Office

CINDY S. VOVA, P.A.

CINDY S. VOVA

APMITNED

FLORIA & FIRG

November 27, 1001

TELEPHONE (954) 463-2766 FACSIMILE (954) 761-1524

Florida Department of State Department of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Change of Address of Registered Agent

Corporation: Ultramatic Sleep of Florida, Inc.

Dear Sir or Madam:

Attached hereto please find a check for \$35.00 to change the address for the above-referenced corporation's registered agent, to wit: Cindy S. Vova, from 517 S.W. 1st Avenue, Ft. Lauderdale, FL 33301 to:

Cindy S. Vova 101 S.E. 10th Street Ft. Lauderdale, FL 33316 300004700563--9 -11/30/01--01060--018 *****35.00 *****35.00

I also attached the Statement of Change of Registered Agent form for this request.

I thank you for your attention to this matter.

Very truly yours.

CINDY S. VOVA RY R.T.

CSV/pt encl.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of HORIGA
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida. 1. The name of the corporation: WHRAMATIC Sleep OF Florida, Inc.
1. The name of the corporation
2 The mailing address of the comporation: 2083 N. Powerline Road, #H,
2. The maning address of the soft
Pompano Beach, FL 33069
3. Date of incorporation/qualification: 05-30-97 Document number: P970004925
4. The name and address of the current registered agent and office:
Cardy Voya
JIM SUI 184 AIRME
F1000 F 33301 FE 5 T
5. The name and address of the new registered agent (if changed) and/or registered office (if changed)
(P. O. Box Not Acceptable)
Cindy Your
101 SE 10th Street
Ft. LAUD, FR 33316
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board. X NOU 12 1200 / (Date)
(Computer of an officer chairman of vice chairman of the sound)
KRON PASSERSON PRESSUENS
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as
registered agent
(Date)
(Signature of Registered Agent)
If signing on behalf of an entity: (Capacity) (Capacity)
(Capacity)

* * * FILING FEE: \$35.00 * * *