CAPITOL CORPORATE SERVICES, INC. P9700067500

March 11, 1998

FLORIDA SECRETARY OF STATE P. O. Box 6327 Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: FLMG MATTRESS CORP.

Ollanie Lundgen

Dear Filing Clerk:

Enclosed please find a Statement of Change of Registered Office/Agent, for the above referenced name, which is to be filed in your office. I have enclosed check # 1583 in the amount of \$ 35.00 for the filing fee. After filing please return to me the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please contact me at 800-472-0544.

Thank you,

Delanie Lundgren

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VS MAR 1 9 1998

*****35.00

da Department of State, Jim Smith, Secretary of State

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

| Florida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office |
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| or registered agent, or both, in the State Florida. |
| 1a. The name of the corporation is: FLMG MATTRESS CORP. |
| 1b. Date of incorporation: 8/5/97 Document number P97000067500 |
| 2. The name and address of the current registered agent and office: Andrew Katz |
| 2900 Country Club Lane Southwest, Hallandale, F1 33009 |
| 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) |
| NRAI Services, Inc. |
| 526 East Park Avenue, Tallahassee, Florida 32301 |
| The street address of its registered agent 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. |
| Typed or printed name and title |
| March, 9, 1998 DATE |

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 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.

| AS TIEGISTETED AGENT. |
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| NRAI Services, Inc. |
| SIGNATURE By: Olani Lundgen asst. |
| (hegistered Agent) |
| DATE 3-11-98 |
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FILING FEE: \$35.00