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FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

PH: (850) 668-4318 FX: (850) 668-3398

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DATE:	MAY 10, 2000		N 10 M	TLED	
ACCOUNT NO:	FCA00000015		TOTAL STATE		
AUTHORIZATION:	ABBIE/PAUL HODGE	3			
TYPE OF FILING: CHANGE OF REGISTERED A	.GENT	0000 -05 **	032473 5/11/0001 ****35.00	3 7 10 003001 *****35.	-4 7 .00
NAME:					
AMERICAN MATTRESS, INC.			-		
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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 Florida Statutes,
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 is: AMerican Mathress Inc-
11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2. The mailing address of the corporation is: 2730 Eunice Ave, Orlando
3. Date of incorporation/qualification: March 6,1997 Document number: 1/191740
4. The name and address of the current registered agent and office:
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- MORD, ENCKSIN
4975 Red Brick Run SS 8
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
NRAI SERVICES, INC.
526 E. Park Avenue
Tallahassee, FL 32301
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.
12 C 4/26/20
(Signature of an officer, chairman or vice chairman of the board) (Date)
Continete et a Conti
(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.
Delance Lundgren May 9, 2000
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Delanie Lundgren Asst. Sec.
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

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