

04-24-2000

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RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- New
- Resubmission (Non-Recordation)
Document ID #
- Correction of PTO Error
Reel # Frame #
- Corrective Document
Reel # Frame #

Conveyance Type

- Assignment License
- Security Agreement Nunc Pro Tunc Assignment
- Merger
Effective Date
Month Day Year
- Change of Name
- Other

Conveying Party

Mark if additional names of conveying parties attached

Name

Execution Date
Month Day Year

Formerly

- Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

- Individual General Partnership Limited Partnership Corporation Association

Corporation Association

Other

Citizenship/State of Incorporation/Organization

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

04/21/000 DNGUYEN 00010352 339658

FOR OFFICE USE ONLY

01 FC:481 40.00 OP
02 FC:482 150.00 OP

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK
REEL: 002056 FRAME: 0912

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

609-987-6886

Name

Susan Okin Goldsmith, Esq.

Address (line 1)

Buchanan Ingersoll P.C.

Address (line 2)

650 College Road East

Address (line 3)

Princeton, New Jersey 08540

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

#

2

Trademark Application Number(s) or Registration Number(s)

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

1339658

1757763

1748796

1554222

1697217

1728356

1589453

Number of Properties

Enter the total number of properties involved.

#

7

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

190.00

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

50-1057

Authorization to charge additional fees:

Yes

No

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Susan Okin Goldsmith

Susan Okin Goldsmith

3/22/00

Name of Person Signing

Signature

Date Signed

CERTIFICATE OF AMENDMENT
OF THE
CERTIFICATE OF INCORPORATION
OF
DIAL-A-MATTRESS FRANCHISE CORP.

UNDER SECTION 805 OF THE BUSINESS CORPORATION LAW

The undersigned, being the president of Dial-A-Mattress Franchise Corp., does hereby certify and set forth:

(1) The name of the corporation is Dial-A-Mattress Franchise Corp.

(2) The certificate of incorporation of Dial-A-Mattress Franchise Corp. was filed by the Department of State on the 20th day of September, 1983.

(3) Paragraph (1) of the certificate of incorporation of Dial-A-Mattress Franchise Corp., which sets forth the name of the corporation, is hereby amended to read:

(1) The name of the corporation is Dial-A-Mattress Operating Corp.

(4) This amendment to the certificate of incorporation of Dial-A-Mattress Franchise Corp. was authorized by vote of the board of directors followed by the affirmative vote of the holders of a majority of all outstanding shares entitled to vote thereon at a meeting of the shareholders of said corporation duly called and held on the 3rd day of October, 1990, a quorum being present.

IN WITNESS WHEREOF, the undersigned have executed and signed this certificate this 4th day of October, 1990

DIAL-A-MATTRESS FRANCHISE CORP.

By: *Napoleon Barragan*
NAPOLÉON BARRAGAN

STATE OF NEW YORK, COUNTY OF NEW YORK : ss.:

Napoleon Barragan, being sworn says: I am the president of DIAL-A-MATTRESS FRANCHISE CORP., a New York corporation; I have read the within Certificate of Amendment of the Certificate of Incorporation and know the contents thereof are true to my knowledge.

Sworn to before me on
October 4, 1990

Howard Hirschfeld

Napoleon Barragan
NAPOLÉON BARRAGAN

HOWARD HIRSCHFELD
Notary Public, State of New York
No. 81-4854489
Qualified in New York County
Commission Expires Feb. 10, 1994

FROM : *
N. Y. S. DEPARTMENT OF STATE
DIVISION OF CORPORATIONS AND STATE RECORDS

162 WASHINGTON
ALBANY, NY 12231

FILING RECEIPT

CORPORATION NAME: DIAL-A-MATRESS OPERATING CORP.

DOCUMENT TYPE : AMENDMENT (DOM. BUSINESS)
NAME

COUNTY: NEW YORK

SERVICE COMPANY : GERALD WEINBERG, INC.

FILED: 12/27/90 DURATION: ***** CASH #: 901227000455 FILM #: 901227000

ADDRESS FOR PROCESS

REGISTERED AGENT



FILER	FEE	PAYMENTS
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HIRSCHFELD & HIRSCHFELD	FILING : 60.00	CASH : 0.00
51 EAST 42ND STREET	TAX : 0.00	CHECK : 0.00
NEW YORK, NY 10017	CERT : 0.00	BILLED: 70.00
	COPIES : 0.00	
	HANDLING: 10.00	
		REFUND: 0.00

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