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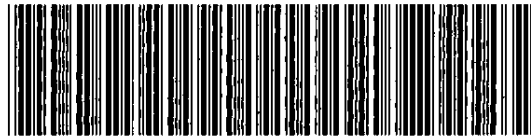
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MADOFF & KHOURY LLP

ATTORNEYS AT LAW

124 WASHINGTON STREET, SUITE 202
FOXBOROUGH, MASSACHUSETTS 02035

TELEPHONE: (508) 543-0040
TELECOPIER: (508) 543-0020

July 22, 2009

FEDERAL EXPRESS

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Re: Application for Foreign Qualification for National Sleep Therapeutics LLC, a
Delaware Limited Liability Company, FEIN 26-4770944

Dear Sir/Madam:

Enclosed for filing with your office are an original and a copy of the Application for Registration of Foreign Limited Liability Company for National Sleep Therapeutics LLC, a Delaware corporation established under Delaware law as of April 29, 2009 with a principal place of business at 498A Woodford Street, Portland, Maine 04103 (the "Company").

Also enclosed is a filing fee check in the amount of \$130.00, payable to the Florida Department of State and the original form of good standing certificate issued to us by the Delaware Secretary of State (that office has recently gone to an "all-email" transmittal of these documents and the enclosed is the original of the certificate sent to us by the Delaware Secretary.

The Company's sole manager is Nationwide Sleep Holdings, Inc., a Delaware corporation (the "Corporation"), whose President is Peter Falkson. Mr. Falkson has signed the Application for the Corporation, which itself serves as Manager of the Company.

In the same package delivering this letter is a letter, application and check for Nationwide Sleep Therapy LLC, an affiliate of the applicant herein. We ask that you treat each application as separate and process them as such.

We would also appreciate it if you could date-stamp the enclosed copy and return it to us in the enclosed, stamped self-addressed envelope.

If you have any questions, please call me at the above number or email me at Khoury@mandkllp.com.

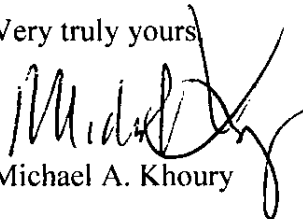
Florida Division of Corporations

July 22, 2009

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Thanks very much for your help.

Very truly yours



Michael A. Khoury

Enclosures

g:\clients\0661\ltr to FLA Sec of State Therapeutics 7-22-09

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: National Sleep Therapeutics LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Michael Khoury, Esq.

Name of Person

Madoff & Khoury LLP

Firm/Company

124 Washington Street, Suite 202

Address

Foxborough, MA 02035

City/State and Zip Code

khoury@mandkllp.com

E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michael Khoury, Esq.

Name of Person

at (508)

543-0040

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. National Sleep Therapeutics LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Delaware 3. 26-4770944
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 4/29/09 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. June 1, 2009
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 498A Woodford Street
Portland, ME 04101-3431
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

Sole Manager: Nationwide Sleep Holdings Inc., Peter Falkson, President

498A Woodford Street, Portland ME 04103

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Provision of sleep

therapy products and services

Peter Falkson, Pres. of Nationwide Sleep Holdings, Inc., Mgr.
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Peter Falkson, Pres of Nationwide Sleep Holdings, Inc., Mgr

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

National Sleep Therapeutics LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company Leon County
(Name)

1201 Hays Street

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee Florida 32301
City/State/Zip

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TALLAHASSEE, FLORIDA

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Having been named as registered agent and to accept service of process for the above stated limited liability company 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 as provided for in Chapter 608, Florida Statutes.

 A-111 V. P.
(Signature)

TIMOTHY J. O'BRIEN

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL SLEEP THERAPEUTICS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF JULY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NATIONAL SLEEP THERAPEUTICS LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF APRIL, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4681790 8300

090711701

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7427677

DATE: 07-20-09