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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

↓ RETURN MAY 31 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DreamWorks Mattress LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joshua Carrico

(Name of Person)

DreamWorks Mattress LLC

(Firm/Company)

1936 Bruce B Downs BLVD UNIT 313

(Address)

Wesley Chapel FL, 33543

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Joshua Carrico

(Name of Person)

at (813)

9294114

(Area Code & Daytime Telephone Number)

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 (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DreamWorks Mattress LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

DreamWorks Mattress LLC
1936 Bruce B Downs BLVD Unit 313
Wesley Chapel FL, 33543

Mailing Address:

DreamWorks Mattress LLC
1936 Bruce B Downs BLVD Unit 313
Wesley Chapel FL, 33543

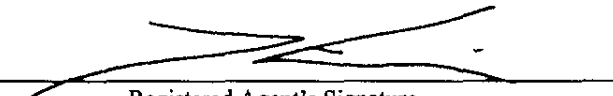
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Joshua Carrico
Name
1936 Bruce B Downs BLVD Unit 313
Florida street address (P.O. Box **NOT** acceptable)
Wesley Chapel FL 33543
City, State, and Zip

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JOSHUA C. CORPORACTIONS
ALLAHASSEE, FLORIDA

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, F.S..


Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Gil Siman

1936 Bruce B Downs BLVD Unit 313

Wesley Chapel FL, 33543

MGRM

Richard Brown

1936 Bruce B Downs BLVD Unit 313

Wesley Chapel FL, 33543

MGMR

Joshua Carrico

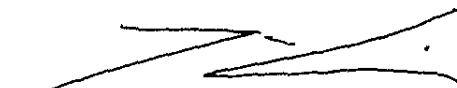
1936 Bruce B Downs BLVD Unit 313

Wesley Chapel FL, 33543

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Joshua Carrico

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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