251



## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILEDER 2008 JAN -2 PM 4:

(Instructions on back of application)

STATE OF IDAHO

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1. The name of the limited liability c	ompany is:
Sleep Explorers LLC	
2. The street address of the Initial re 380 Washington Avenue, Suite 2	•
and the name of the initial register Kimberly Ann Vorse	ed agent at the above address is:
3. The mailing address for future composition PO Box 5000, Ketchum ID 83340	
4. The limited liability company will be	9;
Manager-managed or Memb	er-managed (please check the appropriate box)
5. If manager-managed, list the name If member-managed, list the name Name	e(s) and address(es) of at least one initial manager. (s) and address(es) of at least one initial member.  Address
	EMWINGS.
Kimberly Ann Vorse	PO Box 5000, Ketchum ID 83340
6. Signature of at least one person re-	sponsible for forming the limited liability company:
1.	sponsible for forming the inflitted liability company:
Signature:	
Typed Name: Kimberly Ann Vorse	Secretary of State use only
Capacity: CEO	
Signature	Sizzon
Typed Name:	IDAHO SECRETARY OF STATE
Capacity:	01/02/2008 05:00 CK: 1484486 CT: 172099 BH: 1892
	1 2 106.00 = 106.00 DRGAN LLC