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1/4/2013

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CT CORPORATION

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 608:503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

L	INITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TH	Ŋ,	STATE OF FLORIDA:				
ŧ.	CPAP SUPPLY NISH LLC		,				
•	(Name of Foreign Limited Liability Company; must inclu	udi	"Limited Linbility Company," "L.L.C.," or "LLC.")	*			
- {	· · · · · · · · · · · · · · · · · · ·						
¢C	I name unevailable, enter alternate name adopted for the purpo- meent of the managers or managing members adopting the alter empany," "L.L.C," "1LC."))50)71	of transacting business in Florida and attach a copy of the name. The alternate name must include "Limited List	e written ility			
2,	Delaware	4	45-4231828				
رع	(Jurisdiction under the law of which foreign limited liability company is organized)	٠.	(FEI number, if applicable)	SECT			
4.	1/10/2012	5.	Perpetual	AH.			
•	(Date of Organization)	- •	(Duration: Year limited liability company will cease to exist or "perpetual")	38.5% 1.5%			
б.	upon filing			PT 1			
	(Date first transacted business in Fig. (See sections 608.50) & 608.502 F.S.	oria . to	in, if prior to registration.) determine penalty liability)	OF STA			
7.	19387 US 19 NORTH			_5H #			
	CLEARWATER, FL 33764			₹ 9			
	(Street Address	of	Principal Office)	-			
8.	If limited liability company is a manager-managed	ca	mpany, check here				
9.	The name and usual business addresses of the mana	usual business addresses of the managing members or managers are as follows:					
	John P. Byrnes, 19387 US 19 North, Clearwater, FL 33764			_			
	Shawn S. Schabel. 19387 US 19 North, Clearwater, FL 337	64		· 			
the trair	Attended is an original certificate of existence, no more than 90 of institution under the law of which it is organized. (A photocopy slation of the certificate under eath of the translator must be subm	y i mil	s not acceptable. If the certificate is in a foreign language, a ted.)	records in			
H,	Nature of business or purposes to be conducted or	þ	omated in Florida:	_			
	Sale or Rental of durable madical equipment and supplies			+			
		_		_			
	Cionettus of a manager of ar and	Z	wired commonwhitive of a marrheur				
Signature of a momber of an authorized representative of a member. (In accordance with section 608.408(3), F.S., the exclusion of this document constitutes an affirmation under the							
	penalties of ourlary that the flags stated hardin are true	, I	am aware that any false information submitted in a aird degree felony as provided for in s.817,155, F.S.)				
	PAUL TRIP	P	GENERAL COMESCE				
	Typed or printed to	กม	me of signee				

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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 CPAP Supply U	of the Limited Liabi	lity Company is:			
If unavailable	, the alternate to be t	used in the state of Florida is:			
2. The name	and the Florida stree	t address of the registered agent an	d office are:	SECRETAR ALLAHAS	
		(Name)		SEC. A	
		1200 South Pine, Island Road		<i>₹</i>	
	Florid	REF			
. * ;*	Plentation	FI. 33324			
	•	City/State/Zip	•		•

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 ugent 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.

By C T Corporation System

(Signature)

Madonna Cuddihy
Special Assistant Secretary

(a)Rumme)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PL057 - 12/03/2012 Wolters Klewer Onlin

: ;

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CPAP SUPPLY USA 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 THIRD DAY OF JANUARY, A.D. 2013.

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

5093081

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DATE: 01-03-13