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COVER LETTER

Registration Section Division of Corporations MED-EQUIP HOMECARE SERVICES, LLC Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Charles A. Schillinger, Esquire Name of Person Schillinger & Coleman, P.A. Firm/Company 1311 Bedford Drive Address Melbourne, FL 32940 City/State and Zip Code cschillinger@fla-lawyers.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Charles A. Schillinger, Esquire at 321 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ■ \$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy CR2E055 (12/14)



15 JUL 20 PH 4: 09 FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE

Division of Corporations

JALLAHASSEE, FLORIDA

June 30, 2015

CHARLES A. SCHILLINGER, ESQ. SCHILLINGER & COLEMAN, P.A. 1311 BEDFORD DRIVE MELBOURNE, FL 32940

SUBJECT: MED-EQUIP HOMECARE SERVICES LLC

Ref. Number: M13000006340

We have received your document for MED-EQUIP HOMECARE SERVICES LLC and your check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 415A00013727

FILED

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Con		•	artment of
State: MED-EQUIP H	OMECARE SERVI	CES, LLC	
2. The Florida document number of t	his limited liability company	is: M130000063	340
3. Jurisdiction of its organization:			
4. Date authorized to do business in		2013	1 20
SECTION II (5-9 complete only the	e applicable changes)		
5. New name of the limited liability	company: VET-EQUIP	, LLC Liability Company, ""L.L.C.,"	or stres) #2
(If name unavailable, enter alternate name adopte consent of the managers or managing members as Company," "L.L.C." or "LLC.")	d for the purpose of transacting busine dopting the alternate name. The alterna	ss in Florida and attach a copy ite name must contain "Limited	of the written Liability
6. If amending the registered agent ar the new registered agent and/or the new	nd/or registered office address <u>ew registered office address b</u>	s on our records, e <u>nter t</u> <u>nere:</u>	he name of
Name of New Registered Agent:	Charles A. Schillin	ger, Esquire	
New Registered Office Address:	1311 Bedford Drive		
	Melbourne Enter FI	lorida Street Address	040
	City	, Florida <u>32</u>	Zip Code
New Registered Agent's Signature, it I hereby accept the appointment as recomply with the provisions of all stat duties, and I am familiar with and ac provided for in Chapter 605, F.S. Or, registered office address, I hereby cowriting of this change. 7. If the amendment changes the juri	egistered agent and agree to utes relative to the proper an cept the obligations of my po, if this document is being file nfirm that the limited liability	act in this capacity. I fund complete performance asition as registered age and to merely reflect a chay company has been not be a company has been not been not be a company has been not be a company has been not been	re of my ent as nange in the
7. It the amendment changes the just	saletion of organization, mar	cate new jurisdiction.	

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jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

Charles A. Schillinger, Esquire

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VET-EQUIP, 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 FOURTEENTH DAY OF JULY, A.D. 2015.

5391402 8300

151044551

AUTHENTICATION: 2555004

DATE: 07-14-15

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