## V53013

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Chyletate/2)ph Herie hy
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100269715061

02/23/15--01018--020 \*\*35.00



ANUNA 102/24/15

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	RATION: Breathing S	Systems, Inc.			
DOCUMENT NUME	BER: V53073				
	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	Kramer A. Litvak				
		Name of Contact Person			
	Litvak Beasley W	ilson & Ball, LLF	)		
		Firm/ Company			
	226 E. Government Street				
	,	Address			
	Pensacola, Florida 32502				
		City/ State and Zip Code	<b>-</b>		
aru	ssell@hpa-usa.co	m			
<del></del>		ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
Kramer A. Litvak		<sub>at (</sub> 850	, 432-9818		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43,75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

## Articles of Amendment to Articles of Incorporation of



Breathing Systems, Inc.			~~ ~~ 3±
(Name of Corporation as currently	y filed with the Florida Der	ot. of State)	·
V53073			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida Pr</i>	ofit Corporation adopts the following	g amendment(s) t
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A pi		
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>			
	<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE A	POV)		
(Muning quaress MAT BE AT OST OFFICE I	<u></u>		
	<del></del>		
D. If amending the registered agent and/or registered registered agent and/or the new register		rida, enter the name of the	
Name of New Registered Agent			
	<u> </u>		
	(Florida street address)	ı	
New Registered Office Address:	(City)	, Florida (Zip Code)	
	(City)	(z.ip Code)	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen		ccept the obligations of the position.	
	•		
Signature of	New Registered Agent, if ch	nanging	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	D	Andrew Russell	8800 Grow Drive	
Add			Pensacola, Florida 32514	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
, <b>—</b> ,				
6) Change				
Add				
Remove				

	ling additional Artic heets, if necessary).	(Be specific)	_		
	······································	<del></del>		<del></del>	<u> </u>
· · · · · · · · · · · · · · · · · · ·					
<del></del> -					
<del>.</del>		<del></del>	<del></del>	· <del></del>	
				<u></u>	
		<del></del>	<del></del>		
			_		
·					
	<del></del>		· · · · · · · · · · · · · · · · · · ·		
		<del></del>			
	<u> </u>			<u> </u>	···········
<u> </u>					
	<u>provides for an excha</u>	inge, reclassific	ation, or cancella	tion of issued sha	res,
n amendment p	-1				
ovisions for imp	olementing the amen	ament it not co	ntained in the an	tenument resert.	
ovisions for imp	blementing the amen ble, indicate N/A)	ament it not co	ntained in the an	ienument risen.	
ovisions for imp	olementing the amen ble, indicate N/A)	ament it not co	ntained in the an	tenument riserr.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament if not co	ntainea in the an	tenoment risett.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament if not co	ntained in the an	tenoment risett.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament ii not co	ntained in the an	tenoment risert.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament if not co	ntained in the an	enoment riseri.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament if not co	ntaineu in the an	tenoment risett.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament if not co	ntaineu in the an	lenoment risert.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament if not co	ntained in the an	lenoment risert.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament if not co	ntained in the an	enoment risert.	
ovisions for imp	plementing the amen ble, indicate N/A)	ament if not co	ntaineu in the an	tenoment risert.	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature E Signature	
(By a director, president or other officer – if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Peter Thew	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	_