

V53073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

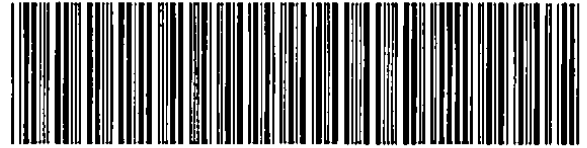
(Business Entity Name)

(Document Number)

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JUL 15 2019
TALLAHASSEE, FLORIDA

2019 JUL 15 PM 5:03

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Breathing Systems Inc.

Name of Corporation

DOCUMENT NUMBER: V53073

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian K. Smithweck

Name of Contact Person

Adams and Reese LLP

Firm/Company

11 N. Water St., Ste. 23200

Address

Mobile, AL 36602

City/State and Zip Code

peter@hpa-usa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian K. Smithweck

Name of Contact Person

at (251) 650-0858

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Breathing Systems Inc.
2. The principal office address: 8800 Grow Dr., Pensacola, FL 32514

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/23/1992 Document number: V53073

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Andrew J. Russell

8800 Grow Dr.

Pensacola, FL 32514

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CT Corporation System

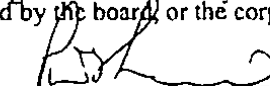
1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Peter Thew, President

Printed or typed name and title

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

7/10/2019

Date

M. E. Jones, Asst. Sec'y.

If signing on behalf of an entity:

Typed or Printed Name

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

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2019 JUL 15 P 5:13
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