Filing Fee: $50.00

ID Number: 44996

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

FICTITIOUS BUSINESS NAME STATEMENT

(To Be Filed In Duplicate)

05 FEB -8 AM 11:18

Pursuant to the provisions of Section 7-1.1-7.1, 7-16-9 or 7-13-2 of the General Laws, 1956, as amended, the undersigned business corporation, limited liability company or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1. The legal name of the applicant business corporation, limited liability company or limited partnership is: Lincare Inc.

2. The fictitious business name to be used is Respiratory Solutions

3. The state or territory under the laws of which it is incorporated, organized or formed is Delaware

4. The date of incorporation, organization or formation is November 3, 1987

5. If a business corporation, the address of its registered office within Rhode Island is CT Corporation System 10 Weybosset Street, Providence, RI 02903

6. If a business corporation, the business in which it is engaged retail sales of medical oxygen; rental of durable medical equipment

7. Applicant is otherwise authorized to do business in the state of Rhode Island.

05 FEB -2 AM 8:07

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 2/4/05

Lincare Inc.
Name of Applicant Corporation, Limited Liability Company or Limited Partnership

By _____ /Secretary
Signature of Officer for the Corporation — Title

or

By _____
Signature of Authorized Person for the Limited Liability Company

or

By _____
Signature of Authorized Person for the Limited Partnership

FILED
JUN 02 2005
By _____
67578

Form No. 624
Revised: 01/99
RI016 - 11/22/99 CT System Online