



State of Rhode Island
Office of the Secretary of State

Fee: \$310.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Corporation
Application for Certificate of Authority

(Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the corporation is Inogen, Inc.

SECTION II

It is incorporated under the laws of State: DE Country: US

This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing 02/05/2024

SECTION III

The name, if different, which it elects to use in Rhode Island:

(a) If the name of the corporation does not contain the word "corporation", "company", "incorporated", or "limited", or an abbreviation thereof, add one of these corporate endings for use in Rhode Island **OR**

(b) if the corporation proposes to qualify and transact business under a different name, list that name:

Note: If option (b) is elected, a Fictitious Business Name Statement (FORM 624A) is required to be filed with this application

SECTION IV

The date of its incorporation is 11/27/2001

and the period of its duration is Perpetual

SECTION V

The location of its principal office is

No. and Street: 859 WARD DRIVE
SUITE 200

City or Town: GOLETA State: CA Zip: 93111 Country: US

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street: 222 JEFFERSON BLVD, SUITE 200

City or Town: WARWICK State: RI Zip: 02888

and the name of its proposed registered agent in Rhode Island at that address is INCORP SERVICES, INC.

SECTION VII

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

MANUFACTURING AND SALE OF MEDICAL EQUIPMENT AND SUPPLIES

SECTION VIII

(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CEO	KEVIN SMITH	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
CHIEF COMMERCIAL OFFICER	GREGOIRE RAMADE	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
CHIEF MEDICAL OFFICER	STANISLAV GLEZER	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
CFO-INTERIM	MIKE SERGESKETTER	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
EXECUTIVE VICE PRESIDENT, GENERAL COUNSEL	JASON SOMER	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 CA
DIRECTOR	ELIZABETH MORA	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	TOM WEST	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	HEATHER RIDER	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	KEVIN SMITH	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	GLENN BOEHNLEIN	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	KEVIN KING	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	MARY KATHERINE LADONE	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US

(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CEO	KEVIN SMITH	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
CHIEF COMMERCIAL OFFICER	GREGOIRE RAMADE	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
CHIEF MEDICAL OFFICER	STANISLAV GLEZER	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
CFO-INTERIM	MIKE SERGESKETTER	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
EXECUTIVE VICE PRESIDENT, GENERAL COUNSEL	JASON SOMER	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 CA
DIRECTOR	ELIZABETH MORA	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	TOM WEST	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US

DIRECTOR	HEATHER RIDER	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	KEVIN SMITH	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	GLENN BOEHNLEIN	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	KEVIN KING	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US
DIRECTOR	MARY KATHERINE LADONE	859 WARD DRIVE, SUITE 200 GOLETA, CA 93111 US

SECTION IX

The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Num of Shares</i>	
CWP			\$0.0010	23,307,814.00

Signed this 5 Day of February, 2024 at 3:42:10 PM by the officers(s). *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.*

By ERIN WRIGHT
Signature of Authorized Officer of the Corporation

Form No. 150
Revised 09/07

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INOGEN, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF FEBRUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INOGEN, INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



3460984 8300

SR# 20240323369

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202718202

Date: 02-01-24



State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

February 05, 2024 03:34 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

