

**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 IThe name of the corporation is Aeroflow Inc.**SECTION II**It is incorporated under the laws of State: NC Country: USA

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

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 10/24/2000and the period of its duration is ☒ Perpetual ☐**SECTION V**

The location of its principal office is

No. and Street: 3165 SWEETEN CREEK RDCity or Town: ASHEVILLEState: NCZip: 28803Country: USA**SECTION VI**

The address of its proposed registered office in Rhode Island is

No. and Street: 222 JEFFERSON BOULEVARDSUITE 200City or Town: WARWICKState: RIZip: 02888and the name of its proposed registered agent in Rhode Island at that address is CORPORATION SERVICES COMPANY**SECTION VII**

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

AEROFLOW HEALTH IS A NATIONAL DME PROVIDER. WE SPECIALIZE IN BREAST PUMPS AND SUPPLIES, MATERNITY COMPRESSION, INCONTINENCE CARE FOR ADULTS AND PEDIATRICS, CPAP AND BIPAP MACHINES AND SUPPLIES, AS WELL AS CONTINUOUS GLUCOSE MONITORS. WE ARE SPECIAL BECAUSE WE DIRECT SHIP OUR PRODUCTS TO PATIENTS.**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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	CASEY LEO HITE	3165 SWEETEN CREEK RD ASHEVILLE, NC 28803 USA
TREASURER	ROBERT DENNIS PATENOTTE	370 E. SONDLEY DR ASHEVILLE, NC 28805 USA
SECRETARY	RYAN EUGENE BULLOCK	118 HARROP DUN CT BILTMORE LAKE, NC 28715 USA
VICE PRESIDENT	JOSHUA ISAAC HILL	721 STREAMSIDE DR ARDEN, NC 28704 USA
DIRECTOR	CASEY LEO HITE	3165 SWEETEN CREEK RD ASHEVILLE, NC 28803 USA

(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
PRESIDENT	CASEY LEO HITE	3165 SWEETEN CREEK RD ASHEVILLE, NC 28803 USA
TREASURER	ROBERT DENNIS PATENOTTE	370 E. SONDLEY DR ASHEVILLE, NC 28805 USA
SECRETARY	RYAN EUGENE BULLOCK	118 HARROP DUN CT BILTMORE LAKE, NC 28715 USA
VICE PRESIDENT	JOSHUA ISAAC HILL	721 STREAMSIDE DR ARDEN, NC 28704 USA
DIRECTOR	CASEY LEO HITE	3165 SWEETEN CREEK RD ASHEVILLE, NC 28803 USA

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>	
CNP			\$0.0000	900,004.00

Signed this 18 Day of June, 2025 at 11:18:01 AM 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 ROBERT DENNIS PATENOTTE

Signature of Authorized Officer of the Corporation



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

AEROFLOW INC.

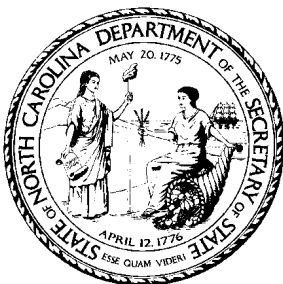
is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 24th day of October, 2000, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 5th day of June, 2025.

Elaine F. Marshall

Secretary of State



Scan to verify online.



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:

June 17, 2025 01:01 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized and prominent.

Gregg M. Amore
Secretary of State

