

State of Rhode Island Office of the Secretary of State

Fee: \$310.0

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

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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 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 10/24/2000

and the period of its duration is X Perpetual

SECTION V

The location of its principal office is

No. and Street:

3165 SWEETEN CREEK RD

City or Town:

ASHEVILLE

State: NC

Zip: 28803

Country: USA

SECTION VI

The address of its proposed registered office in Rhode Island is

No. and Street:

222 JEFFERSON BOULEVARD

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 **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

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country 3165 SWEETEN CREEK RD ASHEVILLE, NC 28803 USA	
PRESIDENT	CASEY LEO HITE		
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 Num of Shares	
ı	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

Form No. 150 Revised 09/07

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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.





Scan to verify online.

Certification# 124166023-1 Reference# 23061193- Page: 1 of 1 Verify this certificate online at https://www.sosnc.gov/verification

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.

Secretary of State

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