

State of New Hampshire

Filed
Date Filed: 09/18/2013
Business ID: 697727
William M. Gardner
Secretary of State

Filing fee: \$50.00
Fee for Form SRA: \$50.00
Total fees \$100.00
Use black print or type.

Form 11
RSA 293-A:2.02

ARTICLES OF INCORPORATION

The undersigned, acting as incorporator(s) of a corporation under the New Hampshire Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

FIRST: The name of the corporation is Breath Ventures, Inc.

SECOND: The number of shares the corporation is authorized to issue: 100

THIRD: The name of the corporation's initial registered agent is Michael J. Persson, Esq.

and the street address, town/city (including zip code and post office box, if any) of its initial registered office is (agent's business address) Lawson Persson & Weldon-Francke, PC, 379 S. Main Street
Laconia, NH 03246

FOURTH: The sale or offer for sale of any ownership interests in this business will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B).

FIFTH: The corporation is empowered to transact any and all lawful business for which corporations may be incorporated under RSA 293-A and the principal purpose or purposes for which the corporation is organized are:

The provision of educational products and services in the field of breathing techniques and holistic self healing processes, including the provision of instructional classes, training programs, books, videos, articles, research, and instructor certification.

State of New Hampshire
Form 11 - Articles of Incorporation 6 Page(s)



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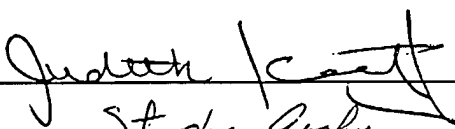

ded, attach additional sheet(s).]

Page 1 of 2

Form 11 Pg 1

SIXTH: The name and address of each incorporator is:

<u>Name</u>	<u>Address</u>
Judith T. Kravitz	PO Box 248
	Tilton, NH 03276
Stephen Gooby	2337 Jenna's Way SE
	Conyers, GA 30013

Incorporator(s)

Date signed: 7/31/2013

To receive your ANNUAL REPORT REMINDER NOTICE by email, please enter your email address here:
mike@laconialaw.com

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mail fees, DATED AND SIGNED ORIGINAL AND FORM SRA to: Corporation Division, Department of State, 107 North Main Street, Concord NH 03301-4989. Physical location: 25 Capitol Street, 3rd Floor, Concord, NH 03301.

**Transformational Breath Foundation
8 Wethersfield Dr
Northfield NH 03276**

Corporate Division, Department of State
107 North Main Street
Concord, NH 03301-4989

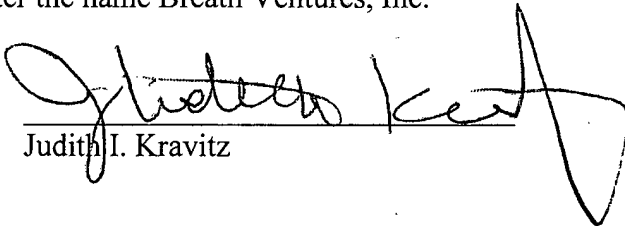
Re: Certificate of Formation – Breath Ventures, Inc.

Dear Sir/Madam:

I, Judith I. Kravitz, as duly authorized Officer of Transformational Breath Foundation, hereby consent to Judith I. Kravitz to register the name Breath Ventures, Inc.

Date:

9/15/13


Judith I. Kravitz

**Form SRA – Addendum to Business Organization and Registration Forms
Statement of Compliance with New Hampshire Securities Laws**

Part I – Business Identification and Contact Information

Business Name: Breath Ventures, Inc.

Business Address (include city, state, zip): PO Box 248, Tilton, NH 03276

Telephone Number: (603) 286-1999 E-mail: info@transformationalbreathing.com

Contact Person: Steve Gooby

Contact Person Address (if different): 2337 Jenna's Way SE, Conyers, GA 30013

Part II – Check ONE of the following items in Part II. If more than one item is checked, the form will be rejected. [PLEASE NOTE: Most small businesses registering in New Hampshire qualify for the exemption in Part II, Item 1 below. However, you must insure that your business meets all of the requirements spelled out in A), B), and C)]:

1. Ownership interests in this business are exempt from the registration requirements of the state of New Hampshire because the business meets ALL of the following three requirements:
 - A) This business has 10 or fewer owners; and
 - B) Advertising relating to the sale of ownership interests has not been circulated; and
 - C) Sales of ownership interests – if any – will be completed within 60 days of the formation of this business.
2. This business will offer securities in New Hampshire under another exemption from registration or will notice file for federal covered securities. Enter the citation for the exemption or notice filing claimed - _____
3. This business has registered or will register its securities for sale in New Hampshire. Enter the date the registration statement was or will be filed with the Bureau of Securities Regulation - _____
4. This business was formed in a state other than New Hampshire and will not offer or sell securities in New Hampshire.

Part III – Check ONE of the following items in Part III:

1. This business is not being formed in New Hampshire.
2. This business is being formed in New Hampshire and the registration document states that any sale or offer for sale of ownership interests in the business will comply with the requirements of the New Hampshire Uniform Securities Act.

Part IV – Certification of Accuracy

(NOTE: The information in Part IV must be certified by: 1) all of the incorporators of a corporation to be formed; or 2) an executive officer of an existing corporation; or 3) all of the general partners or intended general partners of a limited partnership; or 4) one or more authorized members or managers of a limited liability company; or 5) one or more authorized partners of a registered limited liability partnership or foreign registered limited liability partnership.)

I (We) certify that the information provided in this form is true and complete. (Original signatures only)

Name (print): Judith I. Kravitz Signature: Judith I. Kravitz

Date signed: 7/31/13

Name (print): Stephen Gooby Signature: Stephen Gooby

Date signed: 7/31/2013

Name (print): _____ Signature: _____

Date signed: _____

Search

- By Business Name
- By Business ID
- By Registered Agent
- Annual Report
- File Online
- Guidelines
- Name Availability
- Name Appeal Process

Filed Documents

Date: 1/14/2015 (Annual Report History, View Images, etc.)

For a blank Annual Registration Report, click here.

Business Name History

Name	Name Type
Breath Ventures, Inc.	Legal

Corporation - Domestic - Information

Business ID:	697727
Status:	Good Standing
Entity Creation Date:	9/18/2013
Principal Office Address:	PO Box 248 Tilton NH 03276
Principal Mailing Address:	No Address
Last Annual Report Filed Date:	11/17/2014
Last Annual Report Filed:	2014

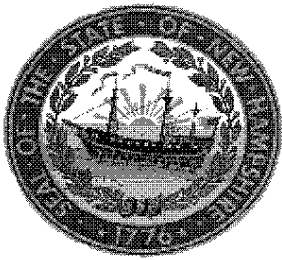
Registered Agent

Agent Name:	Persson, Michael J, Esq
Office Address:	755 N Main Street Laconia NH 03246

Mailing Address:

NEW! File Annual Report Online.

Important Note: The status reflected for each entity on this website only refers to the status of the entity's filing requirements with this office. It does not necessarily reflect the disciplinary status of the entity with any state agency. Requests for disciplinary information should be directed to agencies with licensing or other regulatory authority over the entity.



State of New Hampshire 2014 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2014

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 11/17/2014
Business ID: 697727
William M. Gardner
Secretary of State

BREATH VENTURES, INC.

PO BOX 248
TILTON, NH 03276

ADDRESS OF PRINCIPAL OFFICE:

PO BOX 248
TILTON, NH 03276

REGISTERED AGENT AND OFFICE:

PERSSON, MICHAEL J, ESQ
755 N MAIN STREET
LACONIA, NH 03246

ENTITY TYPE: CORPORATION

BUSINESS ID: 697727

STATE OF DOMICILE: NEW HAMPSHIRE

PROVISION OF EDUCATIONAL PRODUCTS AND SERVICES IN THE
FILED OF BREATHING TECHNIQUES AND HOLISTIC SELF HEALING
PROCESSES

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

- The new mailing address _____
- The new principal office address _____

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES. **Judith I. Kravitz**
STREET **PO Box 248**
CITY/STATE/ZIP **Tilton NH 03276**

TREAS. **Judith I. Kravitz**
STREET **PO Box 248**
CITY/STATE/ZIP **Tilton NH 03276**

V-PRES. **Stephen Gooby**
STREET **PO Box 248**
CITY/STATE/ZIP **Tilton NH 03276**

SEC'Y. **Stephen Gooby**
STREET **PO Box 248**
CITY/STATE/ZIP **Tilton NH 03276**

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. **Judith I. Kravitz**
STREET **PO Box 248**
CITY/STATE/ZIP **Tilton NH 03276**

DIR. **Stephen Gooby**
STREET **PO Box 248**
CITY/STATE/ZIP **Tilton NH 03276**

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

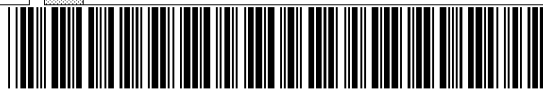
To be signed by an officer, director, or any other person authorized by the board of directors.
I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here: **Michael J. Persson**

Please print name and title of signer: **Michael J. Persson** / **AUTHORIZED PARTY**
NAME TITLE

FEE DUE: **\$150.00**

E-MAIL ADDRESS (OPTIONAL): _____



069772720141501

**WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED**

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301