# 826005

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### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Symphonix Health	Insurance, Inc.
DOCUMENT NUMBER: 836005	Corporation
The enclosed Amendment and fee are submitt	ed for filing.
Please return all correspondence concerning the	nis matter to the following:
Tom Lerche, Vice President of I	nnovation
Symphonix Health Insurar	nce, Inc.
2111 Chestnut, Suite 270	)
Glenview, IL 60025  City/State and Zip Code	
tlerche@symphonixhealt  E-mail address: (to be used for future annual	
For further information concerning this matter	r, please call:
Tom Lerche Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$35.00 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$552.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314	Atreet Address: Amendment Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, FL 32301

### **PROFIT CORPORATION** APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	(Pursuant to s. 60	17.1504, F.S.)	
	SECTIO (1-3 MUST BE CO		FILED I: 48  B JUN 25 PM 1: 48  ALLEANASSEE, FLORIB.
83	36005		Fig. 2
_	(Document number of co	rporation (if known)	707
<sub>1</sub> Vista Life Insurance Com	pany		RIBA
(Name of	corporation as it appears on the	records of the Department of	State)
<sub>2.</sub> Michigan	<u>.</u>	3. March 23, 1976	
(Incorporated und	er laws of)	(Date authorized to	do business in Florida)
	SECTIO 4-7 COMPLETE ONLY THE A		
4. If the amendment changes the rits jurisdiction of incorporation		hen was the change effect	ted under the laws of
5. Symphonix Health Insura	ance, Inc.		
(Name of corporation after the a appropriate abbreviation, if no	amendment, adding suffix t contained in new name o	"corporation," "company f the corporation)	y," or "incorporated," or
•			
(If new name is unavailable in F business in Florida)	lorida, enter alternate corp	orate name adopted for the	ne purpose of transacting
6. If the amendment changes the p	period of duration, indicate	new period of duration.	
			•
	(New dura	tion)	
7. If the amendment changes the j	urisdiction of incorporation	ı, indicate new jurisdictic	on.
	(New jurisd	iction)	
3. Attached is a certificate or docu 90 days prior to delivery of the having custody of corporate rec	ment of similar import, ev application to the Departm	idencing the amendment, ent of State, by the Secre ler the laws of which it is	, authenticated not more than tary of State or other official incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Arthur Carlos, III FSA

President

(Typed or printed name of person signing)

(Title of person signing)

## CERTIFICATION OF ARTICLES OF INCORPORATION OR AMENDMENTS TO ARTICLES OF INCORPORATION

State of Michigan
Department of Insurance and Financial Services
P. O. Box 30220
Lansing, MI 48909

I, R. Kevin Clinton, Director have examined the

Amendment to Articles of Incorporation of

Vista Life Insurance Company

and certify that the same is in accordance with the requirements of the act under which this company is organized.

OHECTOR SOUND TO THE SERVICE AND FE

Signed this Z day of May, 2013 at Lansing, Michigan

R. Kevin Clinton, Director



### STATE OF MICHIGAN

## Attorney General's Department Lansing, Michigan

I Hereby Certify, That I have examined the

## AMENDMENT TO ARTICLES OF INCORPORATION OF VISTA LIFE INSURANCE COMPANY

and find the same in accordance with the requirements of the statutes of the State of Michigan and not in conflict with the Constitution of this State.

Dated at Lansing, Michigan, this 2nd day of May, 2013.

Jason R. Evans

Assistant Attorney General

NOITAULAVE EVALUATION NOISIVID

FIS 0066 (10/07) Office of Financial and Insurance Services Page 1 of 2

### Amendment or Restatement of Michigan Articles of Incorporation

APR 19 2013

Fees and attachments must accompany this filing. Please use the checklist and remittance stub on page 2 of this form to complete your filing.

RECEIVED Valida

Validation code: 96-11-88 25.00

Name of Corporation Symphonix He Vista Life Insu	raith Insurance, Inc. f/k/a rance Company	This corporation is organized under the provisions of Public Act 218 of 1956, as amended; Chapter 52			
Details about meeting where amenda	nent vote was taken:	The vote on amenda	ents was:		
Type of meeting (select one):	Date of meeting:		In person	Ву ргоху	Total
🗌 Annuai 🔳 Special	April 19, 2013	Votes FOR		1	1
City meeting was held in:		Votes AGAINST			
Glenview. II					

THE ARTICLES OF INCORPORATION ARE TO BE AMENDED AS FOLLOWS: (attach additional sheets if necessary) Amending only-List article amended, and state the amendment.

Amending & Restating-List article amended, and state the amendment, then restate articles including amendment.

The first sentence of Article II of Articles of Incorporation of the corporation is amended to read as follows: The name assumed by this Corporation and by which it shall be known in law is Symphonix Health Insurance, Inc.

\* See attached written consent

#### Corporate Certification

We certify that we are the president and secretary of this corporation, transacting business under Michigan Public Act 218 of 1956 as amended. Notice of the intention to amend the articles of incorporation was given to the members or stockholders of this corporation in compliance with §500.5214 of the Michigan Insurance Code. After providing proper notice, a meeting was held and it was resolved by the required vote of stockholders or members to amend or restate the articles of incorporation, details of which are described above %

Signature of the President of the corporationDa	ate Signature of the Secretary of the corporation	Date
April 19	, 2013 Charles I lyry	April 19, 2013
President's name typed or printed	Secretary's name typed or printed	
Arthur C. Carlos, III FSA	Charles J. Rysz FSA	

P.A. 218 of 1956 as amended requires submission of this form by domestic insurance corporations that intend to amend their articles of incorporation. Amendments are not approved until this form is filled with, and approved by, the Commissioner.



Michigan Department of Licensing and Regulatory Affairs

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# WAIVER OF NOTICE AND WRITTEN CONSENT OF SOLE SHAREHOLDER OF VISTA LIFE INSURANCE COMPANY

WHEREAS, the Symphonix Health Holdings, LLC is the sole shareholder of Vista Life Insurance Company (the "Company") through the consummation of the transactions contemplated by the Stock Purchase Agreement dated February 1, 2013 by and among Symphonix Health Holdings, LLC, The American Road Insurance Company and the Company;

WHEREAS, the Company Bylaws permit the sharcholder to waive notice of meetings;

WHEREAS, the Company desires to change its name to "Symphonix Health Insurance, Inc." and such action requires approval by the sharcholder; and

WHEREAS, the Company has prepared a proposed Amendment to its Articles of Incorporation to reflect the name change (the "Amendment")

### NOW, THEREFORE, IT IS HEREBY RESOLVED THAT:

- 1. Notice of meeting of the shareholder for purposes of the approving the Amendment to the Articles of Incorporation is waived.
- 2. The Company's name shall be changed from "Vista Life Insurance Company" to "Symphonix Health Insurance, Inc."
- 3. The Amendment is approved, and the President and Secretary of the Company are authorized to execute and file the same with the State of Michigan.
- 4. The President and Secretary of the Company are further authorized to take such other actions as either or both of them deem necessary and appropriate to accomplish the Company's name change.

IN WITNESS WHEREOF, the undersigned, the sole shareholder of the Company, has executed this Waive of Notice and Written Consent as of April 19, 2013.

Symphonix Health Holdings LLC

By: Mark A Radzi

Its: Secretary