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## FOREIGN PROFIT/NONPROFIT CORPORATION

HearingLife USA, Inc.

| Certificate of Status | 0       |
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ST CORP

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| (If name unavailabl                             | e in Florida, enter afternate corporate                    | name     | adopted for the purpose of transacting business in Florida)  |          |
|---|--|----------|--|----------|
| 2. Delaware                                     |  | 3.       | n/a  |          |
| (State or country und                           | der the law of which it is incorporated                    | )        | (FEI number, if applicable)  |          |
| 4. June 12,2006                                 |  | 3.       | perpenual  |          |
| (Date of  | incorporation)   |          | (Duration: Year corp. will cease to exist or "perpetual")  |          |
| 6. October 8, 2007                              |  |          |  |          |
|   | (Date first transacted busin<br>(SEE SECTIONS 607.1501 & 6 | 07.1.    | a Florida, if prior to registration) 502, F.S., to determine penalty liability)  |          |
| 7. 2795 E. Cottonwood                           | Parkway, Suite 660, Salt Lake City, 1                      | Umh      | 84121  |          |
|   | (Principal office  |          |  |          |
| 2795 B. Cottonwoo                               | d Parkway, Suite 660, Salt Lake City,                      | Utel     | 184121   | -1       |
|   | (Current mailing   | g edd    | ires)  | -        |
| 8. Purchase and sell he                         | saring aids and to provide services rela                   | nted f   | hereto.  | Ţ        |
| (Purpose(s) o                                   | corporation authorized in home state                       | OF C     | ountry to be carried out in state of Florida) 70 T   | 1        |
| 9. Name and <u>street a</u>                     | ddress of Florida registered agent:                        | (P.C     | D. Box NOI acceptable)   | ;        |
| Name:   | C T Corporation System                                     |          | D. Box NOT acceptable)   | <b>2</b> |
| Office Address:                                 | 1200 South Pine Island Rose                                | 1        |  |          |
|   | Plantation   |          | Florida 33324  |          |
| _   | (City)   |          | (Zip code)   |          |
| 10. Registered agen                             | t's accentance:  |          |  |          |
| Having been named                               | as registered agent and to accept s                        | ervi     | ce of process for the above stated corporation at the place  | <b>.</b> |
| designated in this ap-<br>further cover to com- | plication, I hereby accept the appe                        | inin     | nent as registered agent and agree to act in this capacity.<br>clative to the proper and complete performance of my du | I        |
| and I am familiar wi                            | th and accept the obligations of m                         | y po     | emare to the proper and complete performance of my du<br>sition as registered agent.                                   | ues,     |
|   | C T Corporation System                                     | •        | <b>3</b> • • • • • • • • • • • • • • • • • • •   |          |
| _   | V) 1   |          | Hiadi Liesch   |          |
| Bv:   | Michigan Klerch  | <u> </u> | Assistant Secretary  |          |

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

PLDID - MICHINGS C TRYEGO OFFICE



| A. DIRECTORS  | ALLAHASSEE TLORIDA |
|---|--------------------|
| Chairman:   | TOSEE STATE        |
| Address:  | -okid              |
| Vice Chairman:  |                    |
| Address:  |                    |
| Director: Samuel L. Westover  |                    |
| Address: 2975 E. Cottonwood Parkway, Suits 660  |                    |
| Sait Lake City, UT 84121  |                    |
| Director: Jeffrey R. Geigel   |                    |
| Address: 2975 B. Cottonwood Parkway, Suite 660  |                    |
| Sah Lake City, UT 84121   |                    |
| B. OFFICERS   |                    |
| President: Samuel L. Westover   |                    |
| Address: 2975 E. Cottonwood Parkway, Suite 660  |                    |
| Salt Lake City, UT 84121  |                    |
| Vice President:   |                    |
| Address:  |                    |
| •   |                    |
| Secretary: Brent W. Shimada   |                    |
| Address: 2975 B. Cottonwood Parkway, Suite 660, Salt Lake City, 84121   |                    |
| Treasurer:  |                    |
| Address:  |                    |
| NOTE: If heptastry, you may hash as addendum to the application listing addition  13.  (Signature of Director of Officer listed in number 12 of the app |                    |
| 14. Brent H. Shimada, Secretary   |                    |
| (Typed or printed name and capacity of person sign  | ing application)   |

FER 19 - III/05/0004 CT Sympa Outline

FILED

TALLAHASSEE, FLORIDA

ON TO

## ADDENOUM TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

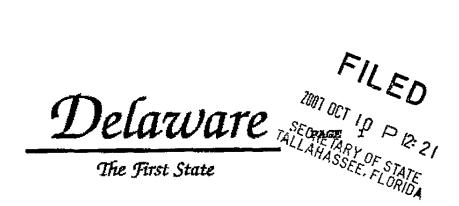
HearingLife USA, Inc.

Director: Broat H. Shimada

Address: 2795 E. Cottonwood Parkway, Suite 660

Salt Lake City, Utah 84121

18/16/2087 14:11 8582227615 CT CORP PAGE 04/05



I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEARINGLIFE USA, 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 NINTH DAY OF OCTOBER, A.D. 2007.

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

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

4173716 8300 071098714



Harriet Smith Windson, Secretary of State

AUTHENTICATION: 6060394

DATE: 10-09-07