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Florida Department of State

Division of Corporations

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FLORIDA LIMITED LIABILITY CO.

Lifestyle Hearing Healthcare & Design Center, LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608 and/or 621,F.S.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the Limited Liability Company is:

LIFESTYLE HEARING HEALTHCARE & DESIGN CENTER, LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

15669 CALOOSA CREEK CIRCLE

FT. MYERS, FLORIDA 33908

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:

DEBRA L. MIKUS

15669 CALOOSA CREEK CIRCLE

FT. MYERS, FLORIDA 33908

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

x Debra L. Mikus

DEBRA L. MIKUS / Registered Agent's signature

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LIFESTYLE HEARING HEALTHCARE & DESIGN CENTER, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
DEBRA L. MIKUS
15669 CALOOSA CREEK CIRCLE
FT. MYERS, FLORIDA 33908

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x Debra L. Mikus

Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

DEBRA L. MIKUS