

REC'D RIDGS BSD
24 JUL 15 AM 11:21:26State of Rhode Island
Department of State - Business Services Division

REINSTATEMENT

1. Entity ID Number: 001690654	2. The name of the entity is: The Hearing Loss Foundation																											
3. Date of Revocation: 05-06-2021	4. Reason for Revocation: Annual Report																											
5. Entity Type: Non-Profit Corporation																												
6. The reinstatement requirements are: <table><tr><td><input checked="" type="checkbox"/> Annual Reports (# of reports) 5</td><td>(report filing fee) \$ 20</td><td>Total Fees \$ 100</td></tr><tr><td><input checked="" type="checkbox"/> Penalty fees (# of years) 4</td><td>(penalty fee) \$ 25</td><td>Total Fees \$ 100</td></tr><tr><td colspan="3"><input type="checkbox"/> Replacement filing fee \$</td></tr><tr><td colspan="3"><input type="checkbox"/> LOGS (Tax Good Standing)</td></tr><tr><td colspan="3"><input type="checkbox"/> Legislative Act/Court Order</td></tr><tr><td colspan="3"><input type="checkbox"/> Change of Agent Form (filing fee) \$</td></tr><tr><td colspan="3"><input type="checkbox"/> Change of Registered Office Form - NO FEE</td></tr><tr><td colspan="3"><input type="checkbox"/> Certificate of Correction</td></tr><tr><td colspan="3"><input type="checkbox"/> Amendment (name change required)</td></tr></table>		<input checked="" type="checkbox"/> Annual Reports (# of reports) 5	(report filing fee) \$ 20	Total Fees \$ 100	<input checked="" type="checkbox"/> Penalty fees (# of years) 4	(penalty fee) \$ 25	Total Fees \$ 100	<input type="checkbox"/> Replacement filing fee \$			<input type="checkbox"/> LOGS (Tax Good Standing)			<input type="checkbox"/> Legislative Act/Court Order			<input type="checkbox"/> Change of Agent Form (filing fee) \$			<input type="checkbox"/> Change of Registered Office Form - NO FEE			<input type="checkbox"/> Certificate of Correction			<input type="checkbox"/> Amendment (name change required)		
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7. Accompanied by																												

MB FILED 1121
JUL 15 2024
BY Q8BCH