### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PICTORIAL INC.	
	on - must include suffix)
Dear Sir or Madam:	300903515903 12/28/70-50059010 *****70.00 ******70.0
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to to transact business in Florida.	
Please return all correspondence concerning this matte	er to the following:
Annie l	1) hitaker
(Name of	f Person)
Pictori	is I = Tuc.
(Firm/Co	<u>D</u>
3435 Stelze	er Road Stite 1000
(Add	
Colombus	DH 42219
(City/State	and Zip code)
For further information concerning this matter, please	call:
Annie Whitaker at (b14) (Name of Person) (Area	Ode & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	112
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee,  Certified Copy Certificate of Status & Certified Copy

#### 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.

	INC.	
words or abbre		ATED", "COMPANY", "CORPORATION" or early indicate that it is a corporation instead of a eat present.)
. Indiana		3, 35-1616640
(State or coun	try under the law of which it is incorporated)	(FEI number, if applicable)
September	10, 1984	5. Perpetual
(Da	te of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
Upon Qualif	ication	
·	(SEE SECTIONS 607.1	not transacted business in Florida, insert "upon qualification.") 501, 607.1502 and 817.155, F.S.)
	(Principal office	address)
		address) To engage in any act or activity for
which cor	o and Sell Training Material. porations may be organized.	To engage in any act or activity for
which cor	o and Sell Training Material. porations may be organized.	To engage in any act or activity for country to be carried out in state of Florida)
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which cor	on and Sell Training Material, porations may be organized.  (s) of corporation authorized in home state of	r country to be carried out in state of Florida)  The state of Florida out in state ou
which corresponds to the corresponding to the corre	on and Sell Training Material porations may be organized.  (s) of corporation authorized in home state of the	r country to be carried out in state of Florida)  The state of Florida out in state ou
which corrections (Purpose P. Name and st Name:	on and Sell Training Material operations may be organized.  (s) of corporation authorized in home state of reet address of Florida registered agent Corporation Service Company	r country to be carried out in state of Florida)  TO SO O TO S

#### 10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service, Company

By: 

(Registered agent's signature).

KIM KILLUNIC ... ASST. Secretage

KIM KURUNICE, ASST. SECRETARY

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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

A. DIRECTORS	
Chairman: See attached officers/directors rider	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	00 TAI
President: See attached officers/directors rider	ECRE
Address:	
	HO H
Vice President:	<u> </u>
Address:	<u></u>
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional of (Signature of Chairman, Vice Chairman, or any officer listed in number 1	
14 TOWN D. CILLIAM Wise Descriptions	
14. JOHN P. GILLIAM, Vice President  (Typed or printed name and capacity of person signing application)	on)

# FILED

00 DEC 28 PK II: 51

SECRETARY OF STATE TALLAHASSIE, FLORIDA

**Corporate Officers & Directors** 

PICTORIAL, INC.

3435 Stelzer Rd, Suite 1000, Columbus, OH 43219	John P. Gilliam	Vice Fresident
		Vino Dropidont
11 Greenway Plaza, Houston, TX 77046	Mark Rybarczyk	<b>Executive Vice President</b>
150 Clove Rd., Little Falls, NJ 07424	Kevin J. Dell	Secretary
150 Clove Rd., Little Falls, NJ 07424	Dennis Sheehan	President
150 Clove Rd., Little Falls, NJ 07424	Dennis Sheehan	EVP//Treasurer/Director
150 Clove Rd., Little Falls, NJ 07424	Lynn J. Mangum	Chairman/Director/CEO
Address		
Business	Name	Position

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

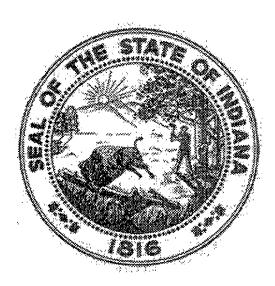
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper office to execute this certificate.

I further certify that records of this office disclose that

#### PICTORIAL INC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on September 10, 1984, and was in existence or authorized to transact business in the State of Indiana on December 12, 2000.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Andiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twelfth day of December, 2000.

SUE ANNE GILROY, Secretary of State

Sue anne Strong