F04000002172

(Re	questor's Name)				
(Address)					
,					
	dress)				
(,				
·(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nan	nel			
(Du	omood Emary (tur	,			
(Do	cument Number)				
Certified Copies	_ Certificates	of Status			
Charles Instructions to	Eiling Officer				
Special Instructions to Filing Officer:					





800031720488

04/20/04--01047--025 **70.00

04/20/04--01047--026 **8.75

04 APR 20 AN II: 53 DIVISION OF COLCURATION

O4 APR 20 PM 3: 05 SECRETARY OF STATE

J. MALLA

April 20, 2004

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399



Re: Ord

Order #: 6084495 SO

Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

The Psychological Corporation (DE)

Evidence of Amendment
Florida

The Psychological Corporation (DE)

Evidence of Amendment
Florida

The Psychological Corporation (DE)

Obtain Document - Misc - Certified copy of Foreign Name Change
Florida

The Psychological Corporation (DE)

Obtain Document - Misc - Certified copy of Foreign Name Change
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

Place of Page 1 of 2

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell Fulfillment Specialist Ashley_Mitchell@cch-lis.com

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.

	hological Corporation					72C' 72
	corporation; must include "INCORPOF Corp," "Inc," "Co," or "Corp.")	RATED,"	"COMPANY,"	"CORPORATI	ON,"	LAHASSEK OKE IAKKE
(If name unava	ilable in Florida, enter alternate corpora			-	-	ess in Florida
Delaware		3.	Applied F	<u> </u>		7
(State or country	y under the law of which it is incorporate	ted)	(FEI number, if a	pplicable)	-
October 2	2, 2003	5.	Perpetual			
(Da	te of incorporation)		(Duration: Yea	r corp. will cease	to exist o	"perpetual")
Upon Qua	lification					
	acted business in Florida. If corporation (SEE SECTIONS 6	5 0 7.1501,			sert "upon	qualification.")
275 Wash	ington Street, Newton, MA 02				···-	
	(Principal of		ress)			
275 Washi	ngton Street, Newton, MA 024					
	(Current max	ning addi	ress)			
	ichina					
Test Publ	(SWIII)					
	(s) of corporation authorized in home s	tate or co	untry to be carrie	d out in state of	Florida)	
(Purpose	(s) of corporation authorized in home s		-			otable)
(Purpose	(s) of corporation authorized in home street address of Florida registered		-			otable)
(Purpose	(s) of corporation authorized in home s		-			otable)
(Purpose Name and str Name:	(s) of corporation authorized in home street address of Florida registered	agent:	-			otable)
(Purpose Name and str Name:	(s) of corporation authorized in home sometime address of Florida registered C T Corporation System	agent:	-	ail Drop Box <u>N</u>		otable)

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

and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

A. DIRECTORS Chairman: SEE ATTACHED Address: __ Vice Chairman: Address: _ Address: __ Director: _ Address: **B. OFFICERS** President: SEE ATTACHED Address: Vice President: Address: __ Secretary: __ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) Linda G. Bottoms, Assistant Secretary

The Psychological Corporation

Directors and Officers

Appointed person	Job Title	Work address
<u>Directors</u>	<u>.</u>	
Dickinson, Edward E.	Director	19500 Bulverde Road, San Antonio TX 78230, US
Galt, Jeffery S.	Director	19500 Bulverde Road, San Antonio TX 78259-3701, US
Prifitera, Aurelio	Director	19500 Bulverde Road, San Antonio TX 78259-3701, US
Officers		
Beeman, Yvette A.	Vice Presiden, General Counsel and Secretaryt	275 Washington Street, Newton MA 02458, US
Bottoms, Linda G.	Assistant Secretary	1105 N. Market Street, Suite 912, Wilmington DE 19801, US
DeMarco, Michele L.	Assistant Treasurer	275 Washington Street, Newton MA 02458, US
Dickinson, Edward E.	Senior Vice President and Chief Financial Officer	19500 Bulverde Road, San Antonio TX 78230, US
Fogarty, Kenneth E.	Vice President-Financial Services and Treasurer	275 Washington Street, Newton MA 02458, US
Fontaine, Charles P.	Vice President-Tax; Assistant Treasurer and Assistant Secretary	275 Washington Street, Newton MA 02458, US
Formica, Lynn M.	Assistant Treasurer	275 Washington Street, Newton MA 02458, US
Galt, Jeffery S.	President and Chief Executive Officer	19500 Bulverde Road, San Antonio TX 78259-3701, US
Horbaczewski, Henry Z.	Vice President	125 Park Avenue, 23rd Floor, New York NY 10017, US
Prifitera, Aurelio	Publishers & President, Harcourt Assessment International	19500 Bulverde Road, San Antonio TX 78259, US
Simonton, Renee	Vice President	1105 North Market Street, Wilmington DE 19801, US

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE PSYCHOLOGICAL CORPORATION" 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 NINETEENTH DAY OF APRIL, A.D. 2004.

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

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

Warriet Smith Windson Harriet Smith Windson

AUTHENTICATION: 3060623

DATE: 04-19-04

3711041 8300

040284943