Florida Department of State Division of Corporations

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REGISTERED AGENT CHANGE WILEY PUBLISHING SERVICES, INC.

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10/29/2010

KHChange

COVER LETTER

Amendment Section Division of Corporations WILEY PUBLISHING SERVICES, INC. SUBJECT: Name of Corporation F09000004101 DOCUMENT NUMBER: The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 111 River Streat Hobeken NJ 07030 City/State and Zip Code E-mail address: (to be used for future amual report notification) For further information concerning this matter, please call: at (201) 748 - 5704 Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR26045 (8/05)

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 60's inge is submitted for a coi ir to change its registered	rporation organized	under the laws of the St	ate of Delaware	
	the corporation: WILEY P	=	•	•	
	office address: 111 RIVE				
3. The mailing a	ddress (if different):				
4. Date of incom	poration/qualification:	10/13/2009	_ Document number:	F09000004101	
5. The name and Florida Depar	I street address of the curt treent of State: (If resigne	rent registered agen ed, enter resigned)	and registered office on	file with the	
	CORPORATION SERVI	ICE COMPANY		五至13月	areyes.
	1201 HAYS STREET			- CREATE BOT	- 9 1
	TALLAHASSEE PL 323	01-2525 US		2010 DCT 29 SECRETARY SECRETARY SECRETARY	777
6. The name and (if changed):	street address of the new	registered agent (f	f changed) and /or registe)
	C T Corporation System				n Ø
	c/o C T Corporation Syste	em, 1200 South Pine	Island Road	. 7	
		P.O. Box NOT acx	epuble		
	Plantation. Fiorida 33324				
The street address changed will	ess of its registered office be identical.	e and the street add	lress of the business offi	ice of its registered agent,	
Such change wi	as author zell by resoluting to are to are or the copporat	on duly adopted by ion has been notifi	its board of directors o	r by an officer so age.	
, [[[]	es of an officer profirectly		michael L. C	resty Corporate	Ļ
				sity. Indicate performance rejetered agent. Or, if this Thereby confirm that the	ל
Ву:	Carporation System	Sand Assista	na Onega nt Secretary Date	10/28/10	
lf signing on be	half of an entity:				
27 Corpe	yped or Printed Name	<u>m</u>			

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/95)