## F97000006078

Qualification/Tax Lien Section Division of Corporations  BJECT: LEARNING PATHWAYS,  (Name of corporation -  ar Sir or Madam:  e enclosed "Application by Foreign Corporation for Autoritificate of Existence", and check are submitted to reginance business in Florida.  asse return all correspondence concerning this matter to the same of Period (Name of Period City/State/City/State/Could you need to call someone concerning this matter, produced to the same of Period (Name of Person)  Area Colored Walls (Name of Person)  Area Colored Walls (Name of Person)  (Name of Person)	orization to Ter the above reference following:  LRG Son)  WAYS, Sony)  ST BLV1	Transact reference	ed foreign	corporation	to
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## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTE	ED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
LEARNING PATHWAYS, INC.	<del></del>
Olympian and appropriate must include the word "INCORPORATED", "COMPANY", "CORPORATION" or	
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a	
natural person or partnership if not so contained in the name at present.)	
2. Secaulage 3. S9-3395910 (FEI number, if applicable)	
2. (State or country under the law of which it is incorporated)  3. (SEI number, if applicable)	
4. March 28, 1996 5. PERPETUAL  (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	, <del>9 = </del> ,
(Date of incorporation)	NO SEC
6. July 1, 1997	<u> </u>
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	J FAT
7. 6355 METRO WEST BUX. SLITE 455	
_	ORA ORA
	29 F
(Current mailing address)	3
8. EDUCATIONAL SERVICES & ASSESSMENT	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	le)
Name: TY M. LAGERBERG	
Office Address: 6355 METRO WEST BWD, Swite 455	
DELANDO FL A , Florida, 32835	
(Zip code)	
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 furl comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I do	mer agree to um familiar with
and accept the obligations of my position as registered agent.	
(Registered agent's signature)	
(Registered agent's signature)	
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this appli Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdice	cation to the
Department of parter of me postern) of many transfer of the parter of th	

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

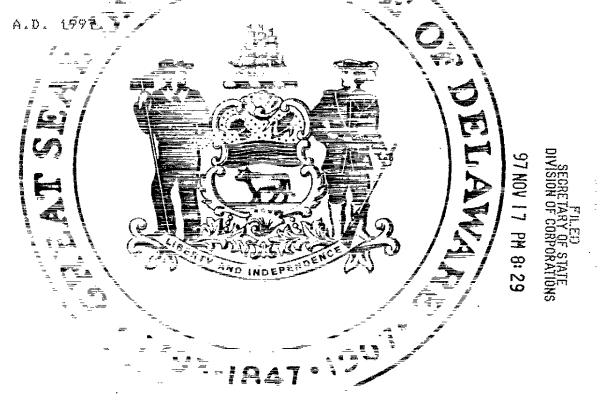
of which it is incorporated.

A. DIREC	TORS (Street address only - P.O. Box NOT acceptable)			
Chairman:	JAMES F. FADIGAN		-	
Address: _	6355 METRO WEST BWD. SWITE 455			
	DRLANDO FL 32835			
Vice Chaiπ	man:			
•			•	
Address				
		-		-
Address: _				
_		97 N	DIVIS SEC	_
Director: _		AON.	<u> </u>	
Address:		<u> </u>	SAL.	
		- <del></del>	25 CS	
B. OFFI	CERS (Street address only - P.O. Box NOT acceptable)	29	Y OF STATE CORPORATIONS	_
President:	LERDY BROCKBANK		<u>ਲ</u> ੰ	
Address: _	13934 RECUERDO DR.			
_	DELMAR CA 92014			
Vice Presid	ient: Ty M. LAGERBERG			
Address: _	6355 METRO WEST BLUD. STE 455			
_	DELANDO FZ 38835			
Secretary:	DEAN FRESONKE			
Address: _	6355 METER WEST BLUD. SULTE 450			
	ORIANDO FL 32835			
Treasurer:				
Addless				
NOTE: H	f necessary, you may attach an addendum to the application listing additional officers and/or director	rs.		
13.	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	<b></b>		
14.	TY M. LAGERBERG, VICE PRESIXENT			
14.	(Typed or printed name and capacity of person signing application)			_

## State of Delaware Office of the Secretary of State

PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LEARNING PATHWAYS, INC." 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 SEVENTH DAY OF NOVEMBER,





Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

2607482 8300

DATE:

8744796

11-07-97

971378843