FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90442 028 ***150.00

DOCUMENT # F99000004999

1. Entity Name

Loislaw.com, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address c/o Wolters Kluwer U.S. Corp
161 N Clark St.	161 N Clark St.
Suite, Apt. #, etc. 48th floor	Suite, Apt. #, etc. 48th floor
City & State Chicago IL	City & State Chicago IL
Zip 60601 Country USA	Zip 60601 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 71-0655999 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Rd

City Plantation FL Zip Code 33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE

Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President / Director
NAME	Richard Krautz
STREET ADDRESS	1185 Avenue of the Americas
CITY-ST-ZIP	New York NY 10036
TITLE	Secretary / Treasurer / Director
NAME	Bruce C. Henz
STREET ADDRESS	161 N Clark St 48th fl
CITY-ST-ZIP	Chg IL 60601
TITLE	Assistant Secretary
NAME	Dale C. Gordon
STREET ADDRESS	161 N Clark St 48th fl
CITY-ST-ZIP	Chg IL 60601
TITLE	Assistant Treasurer
NAME	Peter F. Healy
STREET ADDRESS	161 N Clark St 48th fl
CITY-ST-ZIP	Chg IL 60601
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NAME	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Dale C Gordon 5/14/02 3124252045

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #