P9900053914

Teacher's Edition, Inc.
(Proposed corporate name - must include suffix)

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

600002901466—13 -06/11/99--01023--013 *****78.75 *****78.75

| □ \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate | □\$122.50 Filing Fee & Certified Copy | \$131.25 Filing Fee, Certified Copy & Certificate | |
|-------------------------|----------------------------------|---------------------------------------|---|-------|
| | | ADDITIONAL CO | PY REQUIRED | |
| FROM: | Michael Craig Name | (Printed or typed) | T. | |
| | 7661 Bristol Bay Lane Address | | LAIJASS | |
| | | TL 33467 ty, State & Zip | EE, FLC | OF ST |

ARTICLES OF INCORPORATION

The undersigned incorporator. for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

FILED 99 JUN II PM 4: 29 SEURETART OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Teacher's Edition, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7661 Bristol Bay Lane Lake Worth, FL 33467

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000 (One hundred thousand) at \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Michael Criag 7661 Bristol Bay Lane Lake Worth, FL 33467

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Michael Craig 7661 Bristol Bay Lane Lake Worth, FL 33467

Thehart Le

6-9-99

Date

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date