

F0300000 1286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

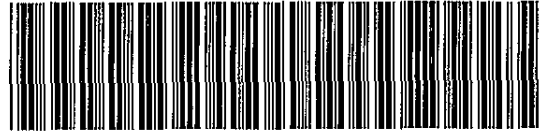
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/17/03--01023--006 **8.75

03/17/03--01023--007 **78.75

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN MAR 17 2003

F03000001286

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ILLIANA EDUCATIONAL PRODUCTS, INCORPORATED
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MEREDITH M. MASON
(Name of Person)

ILLIANA EDUCATIONAL PRODUCTS, INCORPORATED
(Firm/Company)

10404 SWIFT SAIL LANE
(Address)

INDIANAPOLIS, IN 46256
(City/State and Zip code)

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For further information concerning this matter, please call:

MEREDITH MASON at 1-800-578-1113
(Name of Person) (Area Code & Daytime Telephone Number)

JULIE GARCIA 317, 578-1113
904-269-2758

STREET ADDRESS:
 Registration Section
 Division of Corporations
 409 E. Gaines St.
 Tallahassee, FL 32399

MAILING ADDRESS:
 Registration Section
 Division of Corporations
 P.O. Box 6327
 Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status
 \$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certificate of Status & Certified Copy

3/14 per Meredith M. Mason
 sent original Goodstanding
 to Jessica Brown Dept. of
 Management Services.

\$78.75 +
 \$ 8.75 - Certificate
 \$87.50 of status

Illiana Educational Products, Inc.

**Meredith M. Mason
President**

10404 Swiftsail Lane
Indianapolis, Indiana 46256
(317) 578-1113, FAX (317)-578-1114
(800) 578-1113, FAX (888)-578-1118
E-mail: meremason@aol.com
Website: ilfianaproducts.com

March 3, 2003

Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Attention: Certifications

Dear Madams/Sirs:

I would like to request a Certificate of Status for State Term Contract for Illiana Educational Products, Inc.³

Thank you so much for your consideration on this matter. Enclosed is \$8.75 fee.

Sincerely,

Meredith M. Mason

Meredith M. Mason, President

MMM: nch

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Fed Tax ID # 35-19088

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CUS

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.

1. ILLIANA EDUCATIONAL PRODUCTS INC.
(Name of corporation; 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. INDIANA 3. 35-1968802
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. DECEMBER 1995 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 10404 SWIFTSAIL LANE, INDIANAPOLIS, IN 46256
(Principal office address)
SAME
(Current mailing address)

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8. FLORIDA SALES REPRESENTATIVES SELL NON FICTION BOOKS TO
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) FLORIDA SCHOOL & LIBRARIE
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: JULIE GARCIA
Office Address: 1929 LAKE FOREST LANE
ORANGE PARK, Florida 32003
(City) (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 further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Julie M. Garcia
(Registered agent's signature)

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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: MEREDITH M. MASON

Address: 10404 SWIFTSAIL LANE

Vice President: THOMAS E. MASON

Address: 10404 SWIFTSAIL LANE

Secretary: THOMAS E. MASON

Address: SAME

Treasurer: THOMAS E. MASON

Address: SAME

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Meredith M. Mason, President

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. MEREDITH M. MASON, PRESIDENT

(Typed or printed name and capacity of person signing application)

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE

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TALLAHASSEE, FLORIDA

To Whom These Presents Come, Greetings:

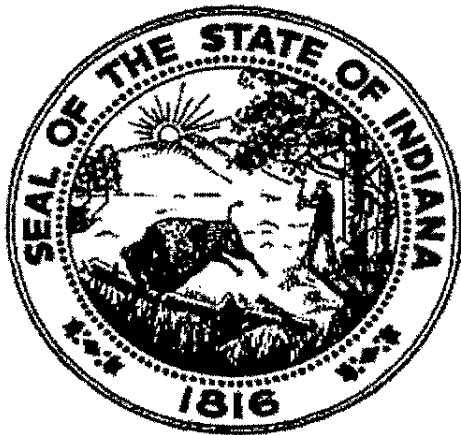
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

ILLIANA EDUCATIONAL PRODUCTS INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on December 08, 1995, and was in existence or authorized to transact business in the State of Indiana on March 12, 2003.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twelfth Day of March, 2003 .

A handwritten signature in black ink that reads "Todd Rokita". The signature is written in a cursive, flowing style.

TODD ROKITA, Secretary of State

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