	Form PTO-1594	DECODE	U.S. DEPARTMENT OF COMMERC	CE
	(Rev. 03/01)	08-06-2001	U.S. Patent and Trademark Office	
	OMB No. 0651-0027 (exp. 5/31. Tab Settings $\Rightarrow \Rightarrow \Rightarrow$			
	To the Honorable Com	101800547	ue attached original documents or copy thereof.	
	Name of Conveying party National Computer System	19/1//1	Name and address of receiving party(ies) Name: NCS Pearson, Inc. Internal Address:	-
	☐ Individual(s) ☐ Association ☐ General Partnership ☐ Limited Partnership ☐ MINNESOTA) ☐ Other ☐ Other ☐ Additional name(s) of conveying party(ies) attached? ☐ Yes X No		Street Address: 11000 Prairie Lakes Drive City: Eden Prairie State: MN Zip: 55344 Individual(s) citizenship Association General Partnership Limited Partnership X Corporation-State MINNESOTA	-
				-
	3. Nature of conveyance:		Other	_
	☐ Assignment ☐ Merger ☐ Security Agreement		If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No Designations must be a separate document from assignment) Additional name(s) & address(es) attached? Yes X No	
	4. Application number(s) or	registration number(s):		
	A. Trademark Applicatio		B. Trademark Registration No.(s) 1,911,371; 2,113,977	
	I Additional number(s) attached X Yes ☐ No			
	Name and address of party to whom correspondence concerning document should be mailed: Name: Daniel J. DeVoe, Esq.		6. Total number of applications and registrations involved:	6
	NCS Pearson, Inc. Internal Address:		7. Total fee (37 CFR 3.41)\$665.00	
	Internal Address.		X Enclosed	i
			Authorized to be charged to deposit accoun	t
	Street Address: 11000 Prairie	Lakes Drive	8. Deposit account number:	
	City: Eden Prairie	State: <u>MN</u> Zip: <u>55344</u>	(Attach duplicate copy of this page if paying by deposit account)	
		DO NOT USE TI	HIS SPACE	
<i>(</i>	a true copy of the original Daniel J. DeVoe Name of Person Signi	ng Signa	psymphion (true and correct and any attached cop 07/11/2001 Date appare er sheets, attachments, and document: 3	y is
06/03/2001 JJAL	AH2 00000007 1911371			
01 FC:481 02 FC:482	40.00 QP G25.00 QP 2988TM	Mail documents to be recorded with a Commissioner of Patent and T Washington,		

Form PTO-1594 (Rev. 03/01)

RECORDATION FORM COVER SHEET CONTINUATION TRADEMARKS ONLY OMB No. 0651-0027

U.S. Department of Commerce Patent and Trademark Office

TRADEMARK

Application number(s) or registration number(s): 4.

B. Trademark Registration No.(s) 1,880,992; 1,910,045; 1,911,370; 1,910,041; 2,091,431; 1,910,047; 1,239,807; 1,910,042; 1,421,514; 1,403,542; 1,910,044; 1,904,412; 1,910,048; 1,316,202; 1,259,947; 1,259,948; 1,259,946; 1,262,325; 2,075,645; 1,910,043; 1,910,055; 1,911,367; 1,904,413; 1,910,049

2988TM

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MINNESOTA SECRETARY OF STATE

1B-519

AMENDMENT OF ARTICLES OF INCORPORATION

READ INSTRUCTIONS LISTED BELOW, BEFORE COMPLETING THIS FORM.

 There is a \$35.00 fee payable to the Secretary of State for filing this "Amendment of Articles of Incorporation". Return Completed Amendment Form and Fee to the address listed on the bottom of the form.
CORPORATE NAME: (List the name of the company prior to any desired name change)
NATIONAL COMPUTER SYSTEMS, INC.
This amendment is effective on the day it is filed with the Secretary of State, unless you indicate another date, no later than 30 days after filing with the Secretary of State. Effective: November 1, 2000
The following amendment(s) to articles regulating the above corporation were adopted: (Insert full text of newly amended article(s) indicating which article(s) is (are) being amended or added.) If the full text of the amendment will not fit in the space provided, attach additional numbered pages. (Total number of pages including this form 1
Article I. of the Articles of Incorporation is amended in its entirety as follows:
The name of this corporation is NCS Pearson, Inc. (the "Company").
This amendment has been approved pursuant to <i>Minnesota Statutes chapter 302A or 317A</i> . I certify that I am authorized to execute this amendment and I further certify that I understand that by signing this amendment, I am subject to the penalties of perjury as set forth in section 609.48 as if I had signed this amendment under oath. (Signature of Authorized Person)
lame and telephone number of contact person: J.N. Fenton, Jr. (952) 829-3040 Please print legibly
All of the information on this form is public and required in order to process this filing. Failure to provide the requested information will prevent the Office from approving or further processing this filing.
f you have any questions please contact the Secretary of State's office at (651)296-2803. STATE OF MINNESOTA DEPARTMENT OF STATE

RECORDED: 07/16/2001

RETURN TO:

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Secretary of State

180 State Office Bldg., 100 Constitution Ave. St. Paul, MN 55155-1299, (651)296-2803

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