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To:

Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : PCA000000023 Phone

: (850)222-1092

Fax Number

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\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one small address for this business entity to be used for annual report mailings.

Desil	X alabana a a .
Emall	Address:

## REGISTERED AGENT CHANGE KATZ COMMUNICATIONS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

9/16/2011

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a co	rporation organi	7, 607.1508, or 617.1508, F. zed under the laws of the St	ate of Delaware	
	the corporation: KATZ C		red agent, or both, in the St NS, INC.	ate of Fioriaa.	
2. The principa	office address: 200 EAST	FBASSE ROAD	SAN ANTONIO TX 78209		
3. The mailing	address (if different):			<u>,,, , , , , , , , , , , , , , , , , , </u>	<del></del>
4. Date of incor	poration/qualification:	2/25/1976	Document number:	835834	
5. The name an Florida Depa	d street address of the curr rtment of State: (If resigne	ent registered age ed, enter resigned	ent and registered office on	file with the	
	CORPORATION SERVI	CE COMPANY			
	1201 HAYS STREET				
	TALLAHASSEE PL 3230	01		> <sub>0</sub> ,	
6. The name and (if changed):	street address of the new	registered agent	(if changed) and /or register	red office AFT	77
	C T Corporation System			16 ARY SSE	STREET,
	c/o C T Corporation Syste	m, 1200 South Pin	e Island Road	<u>-</u> 9 ⊋	m
		P.O. Box NOT a	oceptuble	SI &	O
	Plantation, Florida 33324			—— 5 R 60	•
The street addre as changed will	ss of its registered office be identical.	and the street ad	dress of the business offic	e of its registered ager	nt,
Such change wa authorized by th	s authorized by resolution board, or the corporation	n duly adopted b on has been notif	y its board of directors or ted in writing of the chang	by an officer so	
luk	ma W.		Nichol McCroy	•	
Signatur	वर मान्वीरिक्य वर व्यवद्यवन		Printed or typed num		-
I hereby accept if further agree to further agree to further agree to further, and accument is belocorporation has	the appointment his regist o comply with the provist of I am familiar with and o us filed merely to reflect of been notified in writing o	tered agent and a lons of all statute accept the obliga a change in the r of this change.	ngree to act in this capacit is relative to the proper an ition of my position as reg egistered office address, I	y. Id complete performan istered agent. Or, if th hereby confirm that th	ice tis he
CTC By:	Corporation System		08/26/20	011	
	ature of Registered Agent		Duto		•
f signing on beh	half of an cutity; Kristin Bolde  Assistant Secre				
1 (V"() 1000 Tyl	od or Printed Name				

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)