851408



ACCOUNT NO. :

072100000032

REFERENCE :

082756

4385116

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE: March 19, 2001

ORDER TIME : 10:09 AM

ORDER NO. : 082756-165

CUSTOMER NO: 4385116

600003890576--0

CUSTOMER: Maryann Tigert, Legal Asst

Tribune Company

202 West First Street

Los Angeles, CA 90012

CHANGE OF AGENT

NAME: GOLD COAST PUBLICATIONS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

O. COULLIETTE MAR 2 1 2001

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

	he provisions of sections 607.0502, 617.0502 ed corporation organized under the laws of the		tutes,
	llowing statement in order to change its regis		th in
the State of Flo		tered office of regulier of agents, or bo	,
-	of the corporation is: Gold Coast Publication	ns, Inc.	
		22.1	
2. The mailing	g address of the corporation is: 435 N. Michigan	gan Avenue, Suite 600, Chicago, II	5 60611
3. Date of inco	orporation/qualification: 12/30/81	Document number: 851408	
4. The name a	and address of the current registered agent and	office:	
	CT Corporation System		3
	1200 South Pine Island Road		E TI
	Plantation, FL 33324	200	\tilde{c}
5. The name a	and address of the new registered agent and offi	ce: (P. O. Box Not Acceptable)	_ [I]
	Corporation Service Company		PR ∪ ψ
	1201 Hays Street		မွ
	Tallahassee, Florida 32301	· ·	
The street add agent, as change	ress of its registered office and the street add ged, will be identical.	ress of the business office of its regis	tered
Such change value authorized by	was authorized by resolution duly adopted by the bland.		SO
(Signatu	re of the officer, chairman or vice chairman of the board)	March 7, 2001 (Date)	_
Mark W Hiani	ik, Asst. Secretary		
Mark W. High	(Printed or typed name and title)		
Having been n corporation, I I further agree performance o registered age	amed as registered agent and to accept service hereby accept the appointment as registered as to comply with the provisions of all statutes re f my duties, and I am familiar with and accept nt. /	of process for the above stated zent and agree to act in this capacity. lative to the proper and complete the obligation of my position as	÷
By:	Dossi NUI	2-20-01	
~	(Signature of Registered Agent)	(Date)	-
If signing on behal	f of an entity:		
Bobbie Hall	(Thread or Drinted Name)	Asst. Vice President	_
	(Typed or Printed Name)	(Capacity)	
	* * * FILING FEE: \$3	5.00 * * *	
CR2EO45(7/97)			

P. O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS