

ACCOUNT NO.

072100000032

REFERENCE

082756

4385116

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE: March 19, 2001

ORDER TIME : 10:32 AM

ORDER NO. : 082756-455

CUSTOMER NO: 4385116

900003890559

CUSTOMER: Maryann Tigert, Legal Asst Tribune Company

202 West First Street

Los Angeles, CA 90012

CHANGE OF AGENT

NAME:

TRIBUNE MEDIA SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

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

	the provisions of sections 607.0502, 617.0502, 607.1508, or 617	
_	ed corporation organized under the laws of the State of Delaware	
•	llowing statement in order to change its registered office or regi	sierea ageni, or voin, in
the State of Flor		•
1. The name of	of the corporation is: Tribune Media Services, Inc.	
2. The mailing	g address of the corporation is: 435 N. Michigan Avenue, Suite	£ 600, Chicago, IL 60611.
3. Date of incom	orporation/qualification: 4/18/84 Document num	nber: P01673
4. The name an	and address of the current registered agent and office:	٠
	CT Corporation System	<u> </u>
	1200 South Pine Island Road	Zx 9
	Plantation, FL 33324	
5. The name an	and address of the new registered agent and office: (P. O. Box Not	Acceptable) 5 5
	Corporation Service Company	
	1201 Hays Street	Po ₩ O
	Tallahassee, Florida 32301	TAIL 2:
The street addr	dress of its registered office and the street address of the busines ged, will be identical.	ss office of its registered
Such change w authorized by th	was authorized by resolution duly adopted by its board of direct the board.	ors or by an officer so
	N	arch 7, 2001
(Signatur	ure of an officer, chairman or vice chairman of the board)	(Date)
Mark W. Hiani	ik, Asst. Secretary	
	(Printed or typed name and title)	
corporation, I h I further goree	named as registered agent and to accept service of process for the linereby accept the appointment as registered agent and agree to a e to comply with the provisions of all statutes relative to the proper of my duties, and I am familiar with and accept the obligation of ments?	ict in this capacity. r and complete
By:	DARIO NOVI 3-20-	01
ъу. У	(Signature of Registered Agent) (Date)	
If signing on behalf	olf of an entity:	
Bobbie Hall	Asst. Vice I	
	(Typed or Printed Name) (Cap	pacity)
	* * * FILING FEE: \$35.00 * * *	-

CR2EO45(7/97)