P02943

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RA Change C.COULLIETTE

APR 2 8 2009

EXAMINER

SECRETARY OF STATE OF CORPORATION OF CORPORATION



CORPORATION SERVICE COMPANY ACCOUNT NO. : 12000000195

REFERENCE : 969112 77003

AUTHORIZATION : C

COST LIMIT : \$35.00

ORDER DATE: April 23, 2009

ORDER TIME : 10:09 AM

ORDER NO. : 969112-053

CUSTOMER NO: 7700376

CHANGE OF AGENT

NAME: TAMPA BAY TELEVISION, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS:

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

statement of cha	ange is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of Delaware red agent, or both, in the State of Florida.		
1. The name of	the corporation: TAMPA BAY TEL	LEVISION, INC.		
2. The principal	office address: 312 Walnut Street,	28th Floor, Cincinnati, OH 45202		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 08/06/1984	Document number: P02943		
	d street address of the current registered age	gent and registered office on file with the		
	CT Corporation System			
	1200 South Pine Island Road			
	Plantation, FL 33324			بية
6. The name and (if changed):	d street address of the new registered agen	t (if changed) and /or registered office	09 APR 28	SECRETA NSION O
	Corporation Service Company		28	ARY UT STATIONS
	1201 Hays Street		PH	2007
	(P.O. Box NOT acceptable)		••	RATI
	Tallahassee, FL 32301		œ	- O.K.
The street addre as changed will	ess of its registered office and the street a be identical.	address of the business office of its registered	agent,	
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an officer so tified in writing of the change.		
Mary	ure of an officer or director)	Maureen Cullen, Attorney in fact		
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statu d I am familiar with and accept the obli ng filed merely to reflect a change in the s been notified in writing of this change.	d agree to act in this capacity. tes relative to the proper and complete perforgation of my position as registered agent. Or registered office address, I hereby confirm the	rmance , if this hat the	e s ;
BXYIW	tion Service Company Padure of Registered Agent)	April 27, 2009 (Date)		
` •	half of an entity:	(ivale)		
	Vannoy, Asst. VP			
(1	Syped or Printed Name)			

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

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