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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	me)
(Do	cument Number)	
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TM/SM OWNER NAME CHANGE

11/07/17--01013--001 **750.00



N. CAUSSEAUX NOV 0 7 2017

		COVER LETTE	R	P	ø	, a	В
TO:	Registration Section - Division of Corporations	4					
SUB.	JECT: THE 10:00 NEWS						
		(Name of Mark)					_
	enclosed Certificate of Change of Namce Mark Registration and fee(s) are sul		Applicant of	`a Flo	rida T	radema	rk and/or
Pleas	e return all correspondence concerning	this matter to:					
Cry:	stal Broughan						
	(Contact Person)						
Mar	ks Gray, P.A.						
	(Firm/Company)						
120	00 Riverplace Boulevard, So	uite 800					
	(Address)						
Jaci	ksonville, FL 32207						
	(City, State and Zip Cod	e)					
For fu	urther information concerning this mate	ter. please call:					
Crys	stal Broughan	at (904	₁ 807-2	180			
	(Name of Contact Person)		Code and Dayt	ime Te	lephone	e Number	·)
Enclo	osed is a check for the following amour	nt:					
V	\$50 Filing Fee and Certificate of Registration (Free of Charge)		ng Fee. Certi ite of Registr				
	STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rele	MAILI Registra Division P. O. Bo Tallahas	ition S n of C ox 632	Section orpora 27	n ntions	

CERTIFICATE OF CHANGE OF NAME OF THE REGISTRANT OR APPLICANT OF A FLORIDA TRADEMARK AND/OR SERVICE MARK REGISTRATION

Pursuant to s. 495.081(3). Florida Statutes, the undersigned hereby submits this certificate to change the name of the registrant or applicant of the following Florida trademark and/or service mark registration:

Nai	me of Mark: THE 10:00 NEWS	
Reg	gistration Number: T13000001119	
Dat	te of Registration: 11/12/2013	
a.	Name of owner as it appears on the trademark/service mark registration:	
	POST-NEWSWEEK STATIONS FLORIDA, INC.	
b.	Address of owner as it appears on the trademark/service mark registration:	2 V 18
	4 BROADCAST PLACE	13 × Side
	JACKSONVILLE, FL 32207	1- NOW LINE
		P r
a.	New name of owner:	h: 09
	GRAHAM MEDIA GROUP FLORIDA, INC.	·
b.	New mailing address, if applicable:	

SIGNATURE:	$\bigcirc \qquad \qquad$	Λ
Owner's Signature:	18D) B-P.O.I	
Typed/Printed Name of Person Signing	Crystal Broughan	
STATE OF FLORIDA		
COUNTY OF DUVAL		
Sworn to and subscribed before me on t	this 271 day of October	. 20 17
	Lrystal Brownan	迚
(E	nter Name of Person Signing Above)	
who is personally known to me or [whose identity I	WEIGH OF COR
proved on the basis of		
(Seal)	Mfly	PM 4: 05
_	Notary Public's Signature	
_	Nickey, Bulli to Brick d'Alexa	
	Notary Public's Printed Name	
My Commission Expires:	₩/CON	ANDY L WYNN MISSION # FF 243366 RES: June 23, 2019
(Attach additional sheet if necessary)	EL TARK DOOR	a Notary Public Underwriters

\$50.00

Filing fee: Certificate of Registration: Certified Copy (optional):

Issued Free of Charge \$52.50