7116194

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
·				

Office Use Only



200229355612

ASSIGNMENT

716 194

04/17/12--**0**1003--024 **50.00 /

71/e 25+

FILED 12 APR 17 AM II: 34

NCAUSSEAUX Apr 172012 Examiner

COVER LETTER

NEWSRADIO 970 WFLA (Name of Mark to be assigned) Dear Sir or Madam: The enclosed Mark Assignment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Matthew M. Jennings Cox Smith Matthews Incorporated (Firm/Company) 112 East Pecan Street, Suite 1800 (Address) San Antonio, TX 78205 (City/State and Zip Code) For further information concerning this matter, please call: at (210) 554-5363 (Area Code & Daytime Telephone Number) Matthew M. Jennings (Name of Person)

STREET/COURIER ADDRESS:

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

TQ:

Registration Section
Division of Corporations

FILING FEE: \$50 per class

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

ASSIGNMENT OF MARK REGISTRATION

1. The mark to be assigned is: NEWSRADIO 970 WFLA			
2.	Registration Number: T16194		
3.		nnel Broadcasting, Inc.	
	(b) Assignor's Business Address:	4002 Gandy Boulevard	
		Tampa, FL 33611	
	If Different, Assignor's Mailing Address:	City/State/Zip	
		City/State/Zip City/State/Zip	
4.	(a) Assignee's name: Citicasters	s Co. ♣	
	(b) Assignee's Business Address:	200 East Basse Road	
		San Antonio, TX 78209	
		San Antonio, TX 78209 City/State/Zip	
	If Different, Assignee's Mailing Address:	City/State/Zip	
	If Different, Assignee's Mailing Address:	City/State/Zip	
		City/State/Zip City/State/Zip	
	If Different, Assignee's Mailing Address: (c) Assignee's telephone number: (210 ☐ Individual	City/State/Zip City/State/Zip)554-5363	
	(c) Assignee's telephone number: (210	City/State/Zip City/State/Zip)554-5363 Doint Venture Limited Liability Company	
	(c) Assignee's telephone number: (210 ☐ Individual ☐ Corporation ☐ General Partnership ☐ Limited Part	City/State/Zip City/State/Zip 554-5363 Doint Venture Limited Liability Company	
lfo	(c) Assignee's telephone number: (210 ☐ Individual ☐ Corporation	City/State/Zip City/State/Zip 554-5363 Doint Venture Limited Liability Company enership Union Other:	

used (or that part of the good will of the business connected with the use of and		
assigned by Clear Channel Broadcasting, Inc. to Citicasters	Co.	
(the Assignor)	(the As	ssignee)
6. Assignor's Signature:		
By Hamlet T. Newsom Jr.		
(Typed or Printed Name of Person Signing Above)		
Sworn to and subscribed before me on thisday of April	, 2012	Hamlet T. Newsom Jr. (Name of Individual Signing)
who is personally known to me whose identity I proved on the basis	of	
Notary Seal) ELLEN LOCKWOOD My Commission Expires July 13, 2014 Clu Juclium Signature of Notary Public 7. Assignee's Signature: By Hamlet T. Newsom Jr. (Typed or Printed Name of Person Signing Above)	-	FILED 12 APR 17 AM 11: 34 SECRETARIST STATE TALLANASSEE, FLORIDA
Sworn to and subscribed before me on this // day of April 2012	. 2	mlet T. Newsom Jr. (Name of Individual Signing)
who is personally known to me whose identity I proved on the basis of		div.
ELLEN LOCKWOOD My Commission Expires July 13, 2014 Signature of Notary Public	-	

FILING FEE: \$50 per class
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314