11-26-2002

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Form PTO-1594

U.S. DEPARTMENT OF COMMERCE

(Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005)	U.S. Patent and Trademark Office			
Tab settings ⇒ ⇒ ▼ ▼	- - • • • • •			
To the Honorable Commissioner of Patents and Trademarks:	Please record the attached original documents or copy thereof.			
1. Name of conveying party(ies): Nova Marketing Group, Inc. - 20 - 02 - 20 - 02	2. Name and address of receiving party(ies) Name:Citicasters Co. Internal Address: Street Address:_200 East Basse Road City:_San AntonioState:_TX_Zip:_78209 Individual(s) citizenship			
Additional name(s) of conveying party(ies) attached? Yes No 3. Nature of conveyance: Assignment Security Agreement Other Execution Date: June 30, 2002	Association			
4. Application number(s) or registration number(s): A. Trademark Application No.(s)	B. Trademark Registration No.(s) 2445479			
Name and address of party to whom correspondence concerning document should be mailed: Name: Pamela B. Huff	6. Total number of applications and registrations involved:			
Internal Address: Cox & Smith Incorporated	7. Total fee (37 CFR 3.41)\$ Enclosed Authorized to be charged to deposit account			
Street Address: 112 East Pecan Street Suite 1800	8. Deposit account number:			
City: San Antonio State: TX Zip:78205	SE & S			
9. Signature.	THIS SPACE TO STATE THE SPACE THE SPACE TO STATE THE SPACE			
,	ignature November 14, 2002 Date			
Total number of pages including cov	er sneet, attachments, and document:			

Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

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TRADEMARK REEL: 002622 FRAME: 0286 AUG-26-2002 11:53

CT CORPORATION

7137591950 P.62/68



Prescribed by J. Kenneth Blackwell

Ohio Secretary of State Central Ohio: (614) 466-3910 Toll Free 1-877-SOS-FILE (1-877-767-3453) Expedite this Form: power o PO Box 1390 Columbus, OH 43216 PO Box 1329 Columbus, OH 43216

www.state.oh.us/sos e-mail: busserv@sos.state.oh.us

CERTIFICATE OF MERGER	C	
(For Domestic or Foreign, Profit or Non-Profit)	1.7	[3
Filing Fee \$125.00		יוןיין הויי
(154-MER)		
In accordance with the requirements of Ohio taw, the undersigned corporations, banks, savings banks, s limited liability companies, limited partnerships and/or partnerships with limited liability, desiring to effect		S,
set forth the following facts:	• •	70
I, SURVIVING ENTITY	: :	
A. The name of the entity surviving the merger is:		ւ. Ծ
Citicasters Co.	<u>ار.</u> 	<u>-</u>
B. Name Change: As a result of this merger, the name of the surviving entity has been changed to N/A.	the follow	ing:
(Complete only if name of surviving entity is changing strough the merger)		
C. The surviving entity is a: (Please check the appropriate box and fill in the appropriate blar	ıks)	
☑ Domestic (Ohio) For-Profit Corporation, charter number 626392		
Domestic (Ohio) Non-Profit Corporation, charter number		
Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of		
and licensed to transact business in the State of Ohio under license number		
Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of		
and NOT licensed to transact business in the state of Ohio,		
· Domestic (Ohio) Limited Liability Company, with registration number		
Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of		_
and registered to do business in the State of Ohio under registration number		•
Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of and NOT registered to do business in the State of Ohio.		
Domestic (Ohio) Limited Partnership, with registration number		
Foreign (Non-Ohio) Limited Partnership organized under the taws of the state/country of and registered to do business in the state of Ohio under registration number		-

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AUG-26-2002 11:53 CT CORPORATION 7137591950 P. 93/98 Foreign (Non-Ohio) Limited Partnership organized under the taws of the state/country of and NOT registered to do business in the state of Ohlo. Domestic (Ohio) Partnership having limited liability, with the registration number_ ☐ Foreign (Non-Ohio) Partnership having limited liability organized under the laws of the state/country of and registered to do business in the state of Ohlo under registration number Foreign (Non-Ohlo) Non-Profit incorporation under the laws of the state/county of and licensed to transact business in the state of Chio under license number Foreign (Non-Ohlo) Non-Profit incorporation under the laws of the state/county of and not licensed to transact business in the state of Ohio. II. MERGING ENTITY The name, charter/license/registration number, type of entity, state/country of incorporation or organization, respectively, of which is the entities merging out of existence are as follows: (If this is insufficient space to reflect all merging entities, please attach a separate sheet listing the merging entities) Property of the Thirt will first the second of the first in Name / charter, license or registration number State/Country of Organization Type of Entity California Corporation Nova Marketine Group, Inc. / Charter no. 01843719 III. MERGER AGREEMENT ON FILE The name and mailing address of the person or entity from whom/which eligible persons may obtain a copy of the agreement of merger upon written request: Richard W. Wolf 200 E. Basse Road NOTE: P.O. Box Addresses are NOT acceptable. (name) (street) San Antonio (state) (city, village or lownship) (2)p code) IV. EFFECTIVE DATE OF MERGER This merger is to be effective on: the date of filing (If a date is specified, the date must be a date on or after the date of filing; the effective date of the merger cannot be earlier than the date of filing, if no date is specified, the date of filing will be the effective date of the merger). V. MERGER AUTHORIZED The laws of the state or country under which each constituent entity exists, permits this merger, This merger was adopted, approved and authorized by each of the constituent entities in compliance with the laws

of the state under which it is organized, and the persons signing this certificate on behalf of each of the constituent entities are duly authorized to do so.

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served is: CT Corporation System	\$13 Carew Tower			
	(SIPOR) NOTE: P.O. Box Addresses are NOT acceptable.			
Cincinnati	. 0	hio	45202	
(city, village or township)			(zip code)	
This item MUST be completed if the surviving entity is a foreig uthorized to conduct business in the state of Ohio)	n entify	y wh	nich is not licensed, registered or otherwise	
III. ACCEPTANCE OF AGENT				
The undersigned, named herein as the statutory agent for acknowledges and accepts the appointment of statutory ag				
Signature	of Ag	ont		
he acceptance of agent must be completed by the surviving enanged, or the named agent differs in any way from the name				
II. STATEMENT OF MERGER Upon filing, or upon such later date as specified herein, the listed surviving entity	merg	ing e	entity/entities listed herein shall merge into the	
X. AMENDMENTS The articles of incorporation, articles of organization, certification in the survive Attachments are provided. Attachments are provided.		mes	tic entity have been amended.	
X. QUALIFICATION OR LICENSURE OF FOREIGN SURVIVI	4G EN	m	Y	
A. The listed surviving foreign corporation, bank, savings partnership, or partnership having filmited liability desire bank, savings bank, savings bank, savings and loan, limited liability, and hereby appoints the following as its against the entity may be served in the state of Onio. Tis:	oank, s s to tra ompan statut	savis ansa iy, lis ory :	ngs and loan, limited liability company, limited act business in Ohio as a foreign corporation, mited partnership, or partnership having agent upon whom process, notice or demand	
N/A				
(name)	(Siree	н)	NOTE: P.O. Box Addresses are NOT acceptable.	
.0	hio			
(city, willage or lownship)	7	Top Co	ode)	
			rings and loan, limited liability company,	

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business on Ohio expires or is canceled.

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	alifying entity also states as follows: (Completi elgn Notice Under Section 1703.031 he qualifying entity is a foreign bank, savings st be completed.)		loan, then the folio	wing information		
(a.)	The name of the Foreign Nationally/Federall association is	ly chartered bank, sav	rings bank, or savin	gs and loan		
	N/A					
(b.)	b.) The name(s) of any Trade Name(s) under which the corporation will conduct business:					
	N/A					
						
(c.)	The location of the main office (non-Ohlo) sh	nali be:				
	N/A (street addman)	NOTE: P.O. Ba	Addresses are NOT a	coptable.		
	(city, township, or village)	(county)	(1212)	(zip code)		
(đ.)	The principal office location in the state of O	hio shall be:				
	N/A (street address)	HOTE: P.O. Bea	Addresses are NOT as	cep lable.		
			Ohlo			
	(city, lownship, or village)	(county)	(state)	(zip code)		
(e.)	(Please note, if there will not be an office of the corporation will exercise the following put					
(0.,	(Please provide a brief summary of the busin			not sufficient)		
	N/A					
						
	eign Qualifying Limited Liability Company		g information must	be completed.)		
	ne qualifying entity is a foreign limited liability i	company, the reliewin				
(1/ 1/	ne qualifying entity is a foreign limited liability in The name of the limited liability company in it		v/registration is	,		
(1f ti (2.)			v/registration is			
(h ti	The name of the limited liability company in it	ts state of organization		ai oi		
() (a.)	The name of the limited liability company in it	ts state of organization		io is		
(b.)	The name of the limited liability company in it N/A The name under which the limited liability cor	ts state of organization	sact business in Oh	io is		
(b.)	The name of the limited liability company in it N/A The name under which the limited liability con N/A The limited liability company was organized o	ts state of organization	sact business in Oh	io is		
(b.)	The name of the limited liability company in it N/A The name under which the limited liability con N/A The limited liability company was organized o	ts state of organization	sact business in Oh	io is		

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	N/A			
	(street address)	NOTE: P.O. E	Box Addresses are NOT a	cceptable.
	(city, township, or village)	·	(219je)	(top code
	reign Qualifying Limited Partnersh the qualifying entity is a foreign limite		nformation must be c	ompieted).
) The name of the limited partnership			
	N/A			
(b.)) The limited partnership was formed	d on N/A		
(c.)) The address of the office of the limi	ited partnership in its state/co	runtry of organization	is:
	N/A			
	(accepted address)	NOTE: P.O. B	ox Addresses are MOT ac	ceptable.
	(city, lownship, or village)	(county)	(e1873)	(2)0 0000
(d)		. , ,	(clate)	(2ID code
(d.)	The limited partnership's principal o	. , ,	(state)	(ZID code
(d.)	The limited partnership's principal o	office address is:		
(d.)	The limited partnership's principal o	office address is:	(state) DI Addresses are NOT ac	
(d.)	The limited partnership's principal o	office address is:		ceptable.
	The limited partnership's principal of N/A (street address)	office address is: NOTE P.O. B.	DX Addresses are NOT ac (state)	ceptable. (Zip code:
	The tirrited partnership's principal of N/A (street address) (bity, township, or wilage) The names and business or residen	office address is: NOTE P.O. B.	DX Addresses are NOT ac (state)	ceptable. (Zip code:
(e.)	The limited partnership's principal of N/A (direct address) (city, township, or village) The names and business or resident follows:	NOTE: P.O. Be (county)	DX Addresses are NOT ac (state)	ceptable. (Zip code:
(e.)	The tirrited partnership's principal of N/A (street address) (city, township, or village) The names and business or resider follows: Name	NOTE: P.O. Be (county)	DX Addresses are NOT ac (state)	ceptable. (Zip code)
(e.)	The tirrited partnership's principal of N/A (street address) (city, township, or village) The names and business or resider follows: Name	NOTE: P.O. Be (county)	DX Addresses are NOT ac (state)	ceptable. (Zip code:
(e.)	The tirrited partnership's principal of N/A (pired address) [thiy, township, or village) The names and business or resider follows: Name N/A	MOTE: P.O. Bu (county) Address	(state) partners of the partners	(zp code) ership are as
(e.)	The tirrited partnership's principal of N/A (sheet address) (city, township, or village) The names and business or resider follows: Name N/A and space to cover his hem, places ettach a separate partnership.	(county) Address Address Address	(sale) partners of the partne	(2p code)
(e.) කිරු (f.)	The tirrited partnership's principal of N/A (pired address) [thiy, township, or village) The names and business or resider follows: Name N/A	(county) Address Address Address Address Address Address Address Address Address Address	(sale) partners of the partners and their respective address	(2p code)
(e.) කිරු (f.)	The tirrited partnership's principal of N/A (place) address) (bity, township, or village) The names and business or resider follows: Name N/A Interpretation of the place	(county) Address Address Address Address Address Address Address Address Address Address	(sale) partners of the partners and their respective address	(2p code)

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limited partnership in Ohio is canceled	that it shall maintain said records until the registration of the or withdrawn.
Foreign Qualifying Partnership Havi	ng Limitod Liability
(a.) The name of the partnership shall N/A	be
(b.) Please complete the following app	propriate section (either item b(I) or b(2)):
(1.) The address of the partnershi	ip's principal office in Ohio is:
N/A	NOTE: P.O. Bus Addresses are NOT acceptable.
(sweet address)	NOTE: P.O. BOX ADDRESSES BY NOT BESSELDON.
	. Ohio
(city, village or township)	(zip code)
N/A	
(street address)	NOTE: P.O. Box Addresses are NOT acceptable. (state) (70 code
(Street address) (City, lownship, or v#lage)	
(street address) (city, lownship, or v#lage)	(state) (z/p code
(sheet address) (city, lownship, or v#lage) (c.) The name and address of a statute	(state) (z/p code
(city, lownship, or village) (c.) The name and address of a statute N/A	(state) (z/p code
(city, lownship, or village) (ci.) The name and address of a statute N/A (name)	(state) (this code ory agent for service of process in Ohio is as follows:
(city, lownship, or village) (city, lownship, or village) (c.) The name and address of a statute N/A (name)	(state) (the code carry agent for service of process in Ohio is as follows: NOTE: P.O. Box Addresses are NOT acceptable.
(street address) (city, lownship, or village) (c.) The name and address of a statute N/A (name) (street address)	(state) (zh) code ory agent for service of process in Ohio is as follows: NOTE: P.O. Box Addresses are NOT acceptable. Ohio
(street address) (Gity, township, or v#lage) (c.) The name and address of a statute N/A (name) (street address) (city, village or township) (d.) Please indicate the state or jurisduce	(state) (the code ory agent for service of process in Ohio is as follows: NOTE: P.O. Box Addresses are NOT acceptable. (Sup code)
(city, lownship, or village) (city, lownship, or village) (c.) The name and address of a statute N/A (name) (street address) (city, wilage or township) (d.) Please indicate the state or jurisdut formed	(state) (the code ory agent for service of process in Ohio is as follows: NOTE: P.O. Box Addresses are NOT acceptable. , Ohio (2p code) stion in which the Foreign Limited Liability Partnership has been

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CT CORPORATION

7137591950 P.08/08

The undersigned constituent entities have caused this certificate of merger to be signed by its duly authorized officers, partners and representatives on the date(s) stated below.

Citicasters Co.	NOVE INTEREST OF STREET
(Exact name of entity)	(Exact palme of entity)
By: Haladierid	By: Keller (34)
its: Richard W. Wolf, Vice President	lts: Richard W. Wolf, Vice President
June 30, 2002	June 30, 2002
Date:	-Date:
(Exect name of entity)	(Exact name of entity)
	Ву:
By:	
lts:	Its:
Date:	Date:
	-
(Exact name of entity)	(Exect name of entity)
Ву:	Ву:
Its:	lts:
Date:	Date:
(Exact name of entity)	(Exact name of entity)
Ву:	- Ву:
lts:	- Its:
Date:	Date:
(Exact name of entity)	(Exact name of entity)
Ву:	- ву:
hs:	- Its:
Date:	Date:

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TOTAL P.08

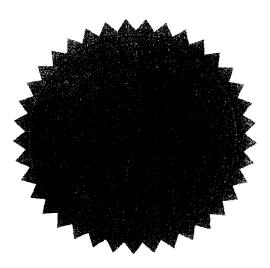




SECRETARY OF STATE

I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the attached transcript of $\underline{\mathcal{I}}$ page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

SEP 1 7 2002

Secretary of State

Sec/State Form CE-107 (rev. 9/98)

TRADEMARK OSP 02 69666

REEL: 002622 FRAME: 0294

DATE: 08/27/2002 DOCUMENT ID 200223900056

DESCRIPTION MERGER/DOMESTIC (MER)

C.T. CORPORATION SYSTEM

17 S. HIGH STREET COLUMBUS, OH 43215 FILING 125.00 EXPED 100.00 PENALTY

CERT

COPY

Receipt
This is not a bill. Please do not remit payment.

ENDORSED - FILED in the office of the Secretary of State of the State of California

SEP 1 3 2002

BILL JONES, Secretary of State

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

625392

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

CITICASTERS CO.

and, that said business records show the filing and recording of:

Document(s)

MERGER/DOMESTIC

Document No(s):

200223900056



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 26th day of August, A.D. 2002.

Ohio Secretary of State

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TRADEMARK REEL: 002622 FRAME: 0295

RECORDED: 11/20/2002