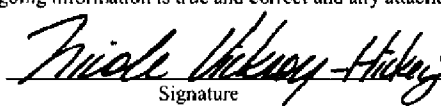


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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| Form PTO-1594 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002) Tab settings | RECORDATION FORM COVER SHEET TRADEMARKS ONLY | U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office |
| To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof. | | |
| 1. Name of conveying party(ies): CINCINNATI BELL DIRECTORY INC. <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State <input type="checkbox"/> Other _____ Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No | 2. Name and address of receiving party(ies) Name: <u>BRW Enterprises Inc.</u> Internal Address: _____ Address: _____ Street Address: <u>201 East Fourth Street</u> City <u>Cincinnati</u> State <u>Ohio</u> Zip <u>45202</u> <input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input type="checkbox"/> Limited Partnership _____ <input checked="" type="checkbox"/> Corporation-State <u>Ohio</u> <input type="checkbox"/> Other _____ If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input type="checkbox"/> No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: <u>March 6, 2002</u> | 4. Application number(s) or registration number(s): A. Trademark Application No.(s) <u>76/173,802</u> B. Trademark Registration No.(s) Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Nicole D. Vickroy-Hickey</u> Internal Address: _____ Street Address: <u>201 East Fifth Street</u> City <u>Cincinnati</u> State <u>OH</u> Zip <u>45202</u> | 6. Total number of applications and registrations involved: <input style="width: 40px; text-align: center;" type="text" value="1"/> 7. Total fee (37 CFR 3.41)\$ _____ <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: <u>06-2226</u> (Attach duplicate copy of this page if paying by deposit account) | |
| DO NOT USE THIS SPACE | | |
| 9. Signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>NICOLE VICKROY-HICKEY</u> Name of Person Signing </div> <div style="text-align: center;">  Signature </div> <div style="text-align: center;"> <u>09 October 2003</u> Date </div> </div> <div style="text-align: center; margin-top: 10px;"> Total number of pages including cover sheet, attachments, and document: <input style="width: 40px; text-align: center;" type="text" value="4"/> </div> | | |

CH \$40.00 062226 76173802

Mail documents to be recorded with required cover sheet information to:
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| 03/11/2002 | 200207000050 | DOMESTIC/AMENDMENT TO ARTICLES (AMD) | 50.00 | 100.00 | .00 | .00 | .00 |

Receipt

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

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10 W. BROAD ST., STE 1000
COLUMBUS, OH 43215

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

768058

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

BRW ENTERPRISES INC.

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

Document(s)
DOMESTIC/AMENDMENT TO ARTICLES

Document No(s):
200207000050



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 8th day of March, A.D.
2002.

J. Kenneth Blackwell
Ohio Secretary of State

Doc ID --> 200207000050

Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State
 Central Ohio: (614) 466-3910
 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

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

| | |
|--------------------------------------|--------------------------------------------------------------------------------|
| Expedite this Form: (Select One) | |
| Mail Form to one of the Following: | |
| <input checked="" type="radio"/> Yes | PO Box 1390 Columbus, OH 43216 ** Requires an additional fee of \$100 ** |
| <input type="radio"/> No | PO Box 1028 Columbus, OH 43216 |

**Certificate of Amendment by
 Shareholders or Members
 (Domestic)
 Filing Fee \$50.00**

(CHECK ONLY ONE (1) BOX)

| | | | |
|-------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------|-------------------------------------------------|
| <input checked="" type="checkbox"/> (1) Domestic for Profit | | <input type="checkbox"/> (2) Domestic Non-Profit | |
| <input type="checkbox"/> Amended (122-AMAP) | <input checked="" type="checkbox"/> Amendment (125-AMDS) | <input type="checkbox"/> Amended (126-AMAN) | <input type="checkbox"/> Amendment (128-AMD) |

Complete the general information in this section for the box checked above.

Name of Corporation Cincinnati Bell Directory Inc.Charter Number 768058 Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

 A meeting of the shareholders members was duly called and held on

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise _____ % as the voting power of the corporation.

 In a writing signed by all of the shareholders members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.**Clause applies if amended box is checked.**

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

Doc ID --> 200207000050

All of the following information must be completed if an amended box is checked.
 If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: BRW Enterprises Inc.

SECOND: The place in the State of Ohio where its principal office is located is in the City of: _____
 _____ (city, village or township) _____ (county)

THIRD: The purposes of the corporation are as follows:

FOURTH: The number of shares which the corporation is authorized to have outstanding is: _____
 (Does not apply to box (2))

Must be authenticated by an authorized representative

Amy Collins, Assistant Secretary
Authorized Representative

3-6-02
Date

Authorized Representative

Date

Authorized Representative

Date