CH \$190.00

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 ETAS ID: TM523523

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Clear Channel Identity, Inc.		09/16/2014	Corporation: TEXAS

RECEIVING PARTY DATA

Name:	iHM Identity, Inc.
Street Address:	20880 Stone Oak Parkway
City:	San Antonio
State/Country:	TEXAS
Postal Code:	78258
Entity Type:	Corporation: TEXAS

PROPERTY NUMBERS Total: 7

Property Type	Number	Word Mark
Registration Number:	2723643	
Registration Number:	2882210	CLEAR CHANNEL
Registration Number:	2884665	CLEAR CHANNEL
Registration Number:	2674768	CLEAR CHANNEL AIRPORTS
Registration Number:	2677525	CLEAR CHANNEL MALLS
Registration Number:	2807051	CLEAR CHANNEL OUTDOOR
Registration Number:	2799665	CLEAR CHANNEL OUTDOOR

CORRESPONDENCE DATA

Fax Number: 3128622200

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: 3128622000

Email: jeffrey.norgle@kirkland.com

Correspondent Name: Jeffrey Norgle

Address Line 1: 300 North Lasalle Street Kirkland & Ellis LLP Address Line 2: Address Line 4: Chicago, ILLINOIS 60654

ATTORNEY DOCKET NUMBER:	10321-165-JN
NAME OF SUBMITTER:	Jeffrey Norgle
SIGNATURE:	/Jeffrey Norgle/

TRADEMARK REEL: 006645 FRAME: 0194

900498538

DATE SIGNED:	05/14/2019	
Total Attachments: 3		
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source=9-16-2014 Clear Channel - IHM Identity TX-Charter#page2.tif		
source=9-16-2014 Clear Channel - IHM Identity TX-Charter#page3.tif		

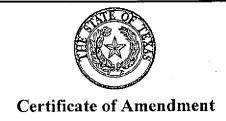
Form 424 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

FAX: 512/463-5709

Filing Fee: See instructions

The date of formation of the entity is:



This space reserved for office use.

FILED in the Office of the Secretary of State of Texas

SEP 16 2014

Corporations Section

13110103 1	
The name of the filing entity is:	
Clear Channel Identity, Inc.	
State the name of the entity as currently shown in the record of the entity, state the old name and not the new name.	ds of the secretary of state. If the amendment changes the name
The filing entity is a: (Select the appropriate entity type be	low.)
□ For-profit Corporation	Professional Corporation
Nonprofit Corporation	Professional Limited Liability Company
Cooperative Association	Professional Association
Limited Liability Company	Limited Partnership
The file number issued to the filing entity by the	secretary of state is: 801066128

Entity Information

Amendments

12/22/08

1. Amended Name

(If the purpose of the certificate of amendment is to change the name of the entity, use the following statement)

The amendment changes the certificate of formation to change the article or provision that names the filing entity. The article or provision is amended to read as follows:

The name of the filing entity is: (state the new name of the entity below)

iHM Identity, Inc.

The name of the entity must contain an organizational designation or accepted abbreviation of such term, as applicable.

2. Amended Registered Agent/Registered Office

The amendment changes the certificate of formation to change the article or provision stating the name of the registered agent and the registered office address of the filing entity. The article or provision is amended to read as follows:

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	Reg (Complete either A or B	istered Agent but not both. Also co	mplete C.)
☐ A. The registered a	gent is an organization		
OR B. The registered a	gent is an individual res	ident of the state w	hose name is:
First Name	M.I.	Last Name	Suffix
The person executing thas consented to serve		that the person des	ignated as the new registered agent
C. The business addres	s of the registered agent	and the registered	office address is:
			TX
Street Address (No P.O. Box)		City	State Zip Code
	3. Other Added, Al	tered, or Deleted l	Provisions
Other changes or additions t is insufficient, incorporate t form for further information	ne additional text by providi	n may be made in the s ng an attachment to th	pace provided below. If the space provided is form. Please read the instructions to this
Text Area (The attached addended	nm, if any, is incorporated herei	n by reference.)	
Add each of the following reference of the added p	owing provisions to the provision and the full te	certificate of form at are as follows:	ation. The identification or
			CD 11 CC
			nation. The identification or as amended are as follows:
		• • • • • • • • • • • • • • • • • • • •	
Delete each of the p	rovisions identified bel	ow from the certific	cate of formation.
1			

Statement of Approval

The amendments to the certificate of formation have been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity.

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Effectiveness of Filing (Select either A, B, or C.)

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RECORDED: 05/14/2019