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04-11-2001



FORM PTO-1618A  
Expires 06/30/99  
OMB 0651-0027

101659814

U.S. Department of Commerce  
Patent and Trademark Office  
**TRADEMARK**

### RECORDATION FORM COVER SHEET TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

#### Submission Type

- New
- Resubmission (Non-Recordation)  
Document ID # \_\_\_\_\_
- Correction of PTO Error  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_
- Corrective Document  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_

#### Conveyance Type

- Assignment  License
- Security Agreement  Nunc Pro Tunc Assignment
- Merger  Effective Date  
Month Day Year \_\_\_\_\_
- Change of Name
- Other \_\_\_\_\_

#### Conveying Party

Mark if additional names of conveying parties attached

Name QED Communications, Inc.

Execution Date  
Month Day Year \_\_\_\_\_

Formerly \_\_\_\_\_

- Individual  General Partnership  Limited Partnership  Corporation  Association

Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization Pennsylvania

#### Receiving Party

Mark if additional names of receiving parties attached

Name WOED-Pittsburgh

DBA/KA/TA \_\_\_\_\_

Composed of \_\_\_\_\_

Address (line 1) 4802 Fifth Avenue

Address (line 2) \_\_\_\_\_

Address (line 3) Pittsburgh Pennsylvania 15213  
City State/Country Zip Code

- Individual  General Partnership  Limited Partnership  Corporation  Association

Corporation  Association

Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization Pennsylvania

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

04/10/2001 TDIAZ1 00000081 1502151  
01 FC:481 40.00 BP  
02 FC:482 75.00 OP

#### FOR OFFICE USE ONLY

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**TRADEMARK**  
REEL: 002267 FRAME: 0857

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages**

Enter the total number of pages of the attached conveyance document including any attachments.

#

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

| Trademark Application Number(s) |                      |                      | Registration Number(s)               |                                      |                                      |
|---------------------------------|----------------------|----------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| <input type="text"/>            | <input type="text"/> | <input type="text"/> | <input type="text" value="1502151"/> | <input type="text" value="1480027"/> | <input type="text" value="1475334"/> |
| <input type="text"/>            | <input type="text"/> | <input type="text"/> | <input type="text" value="1295071"/> | <input type="text"/>                 | <input type="text"/>                 |
| <input type="text"/>            | <input type="text"/> | <input type="text"/> | <input type="text"/>                 | <input type="text"/>                 | <input type="text"/>                 |

**Number of Properties**

Enter the total number of properties involved.

#

**Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed

Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:


Yes

No

**Statement and 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. Charges to deposit account are authorized, as

**Robert F. Petrini**  
**Vice President and**  
**Chief Administrative Officer**  
 Name of Person Signing

  
 Signature 7/13/2000

JUL 13 2000

Date Signed

PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU  
ROOM 308 NORTH OFFICE BUILDING  
P.O. BOX 8722  
HARRISBURG, PA 17105-8722

268

WQED PITTSBURGH

THE CORPORATION BUREAU IS HAPPY TO SEND YOU YOUR FILED DOCUMENT. PLEASE NOTE THE FILE DATE AND THE SIGNATURE OF THE SECRETARY OF THE COMMONWEALTH. THE CORPORATION BUREAU IS HERE TO SERVE YOU AND WANTS TO THANK YOU FOR DOING BUSINESS IN PENNSYLVANIA. IF YOU HAVE ANY QUESTIONS PERTAINING TO THE CORPORATION BUREAU, CALL (717) 787-1057.

ENTITIES THAT ARE CHARITIES AND SOLICIT FUNDS SHOULD CONTACT THE BUREAU OF CHARITABLE ORGANIZATIONS FOR REGISTRATION REQUIREMENTS AT DEPARTMENT OF STATE, BUREAU OF CHARITABLE ORGANIZATIONS, SUITE 300 124 PINE STREET, HARRISBURG, PENNSYLVANIA 17101 (717) 783-1720 OR 1-800-732-0999 WITHIN PENNSYLVANIA.

ENTITY NUMBER: 0230080

MICROFILM NUMBER: 09567

0606-0607

CSC NETWORK  
COUNTER

TRADEMARK  
REEL: 002267 FRAME: 0859

9567-606

Microfilm Number \_\_\_\_\_

Filed with the Department of State on OCT 13 1995

Entity Number 230080

*[Signature]*  
Secretary of the Commonwealth

ARTICLES OF AMENDMENT - DOMESTIC NONPROFIT CORPORATION

DSCB:15-5915 (Rev 89)

In compliance with the requirements of 15 Pa. C.S. § 5915 (relating to articles of amendment), the undersigned nonprofit corporation, desiring to amend its articles, hereby states that:

1. The name of the corporation is: QED Communications, Inc.

2. The address of this corporation's current (a) registered office in this Commonwealth or (b) commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following address to conform to the records of the Department):

|                              |                   |           |              |                  |
|------------------------------|-------------------|-----------|--------------|------------------|
| (a) <u>4802 Fifth Avenue</u> | <u>Pittsburgh</u> | <u>PA</u> | <u>15213</u> | <u>Allegheny</u> |
| Number and Street            | City              | State     | Zip          | County           |

|   |        |
|---|--------|
| (b) _____                                     | County |
| Name of Commercial Registered Office Provider |        |

For a corporation represented by a commercial registered office provider, the county in (b) shall be deemed the county in which the corporation is located for venue and official publication purposes.

3. The statute by or under which it was incorporated is: PA non-profit corporation law

4. The date of its incorporation is: 2-18-53

5. (Check, and if appropriate complete, one of the following):

The amendment shall be effective upon filing these Articles of Amendment in the Department of State.

The amendment shall be effective on: \_\_\_\_\_

6. (Check one of the following):

The amendment was adopted by the members pursuant to 15 Pa. C.S. § 5914(a).

The amendment was adopted by the board of directors pursuant to 15 Pa. C.S. § 5914(b).

7. (Check, and if appropriate complete, one of the following):

The amendment adopted by the corporation, set forth in full, is as follows:

The name of the corporation is

WQED Pittsburgh

The amendment adopted by the corporation as set forth in full in Exhibit A, attached hereto and made a part hereof.

OCT 13 95

PA Dept. of State

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REEL: 002267 FRAME: 0860

9567-607

DSCB:15-5915 (Rev 89)-2

8. (Check if the amendment restates the articles):

The restated articles of incorporation supersede the original articles and all amendments thereto.

IN TESTIMONY WHEREOF, the undersigned corporation has caused these articles of amendment to be signed by a duly authorized officer thereof this 12<sup>th</sup> day of October, 19 95.

QED Communications, Inc.

(Name of Corporation)

BY:



(Signature)

TITLE: Executive VP & COO