

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	Change of legal entity		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
CONTRA COSTA NEWSPAPERS, INC.		07/21/2006	CORPORATION: DELAWARE
RECEIVING PARTY DATA			
Name:	CONTRA COSTA NEWSPAPERS, LLC		
Street Address:	2640 SHADELANDS DRIVE		
City:	WALNUT CREEK		
State/Country:	CALIFORNIA		
Postal Code:	94598		
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	2471807	EAST BAY TIMES	
CORRESPONDENCE DATA			
Fax Number:	(212)837-6269		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	212 837-6550		
Email:	kuhn@hugheshubbard.com		
Correspondent Name:	Perla M. Kuhn		
Address Line 1:	Hughes Hubbard & Reed LLP		
Address Line 2:	One Battery Park Plaza		
Address Line 4:	NEW YORK, NEW YORK 10004-1482		
ATTORNEY DOCKET NUMBER:	013290.0002 PMK/ESP		
NAME OF SUBMITTER:	Perla M. Kuhn		
Signature:	/Perla M. Kuhn/		

OP \$40.00 2471807

Date:

04/02/2008

Total Attachments: 7

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State of California Secretary of State

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:


That the attached transcript of _____ 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

JUL 2 1 2006

BRUCE McPHERSON
Secretary of State

 <p style="text-align: center;">State of California Secretary of State</p> <p style="text-align: center;">LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION - CONVERSION</p>	<p>200620210348 File #</p> <p style="text-align: center;">ENDORSED - FILED In the office of the Secretary of State of the State of California</p> <p style="text-align: center;">JUL 21 2006</p>
	<p>IMPORTANT — Read all instructions before completing this form.</p> <p style="text-align: right;">This Space For Filing Use Only</p>

CONVERTED ENTITY INFORMATION

1. NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," "Ltd. Liability Company," "Ltd. Liability Co.," or the abbreviation "LLC" or "L.L.C.")
Contra Costa Newspapers, LLC

2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.

3. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (Check only one)
 ONE MANAGER MORE THAN ONE MANAGER ALL LIMITED LIABILITY COMPANY-MEMBER(S)

4. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE CITY AND STATE ZIP CODE
2640 Shadelands Drive Walnut Creek, CA 94598-2578

5. NAME OF AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and both items 5 and 8 must be completed. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and item 5 must be completed (leave item 8 blank).)
C T Corporation System

6. IF AN INDIVIDUAL, ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA CITY STATE ZIP CODE
CA

CONVERTING ENTITY INFORMATION

7. NAME OF CONVERTING ENTITY
Contra Costa Newspapers, Inc.

8. FORM OF ENTITY Corporation	9. JURISDICTION California	10. CA SECRETARY OF STATE FILE NUMBER, IF ANY C0459204
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11. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS:
 STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS
 Common Stock - 17,755.17 shares 100%

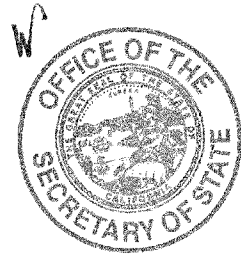
ADDITIONAL INFORMATION

12. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

13. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

<p><i>Patrick J. Talamantes</i> 7/18/06 SIGNATURE OF AUTHORIZED PERSON DATE</p> <p><i>Karole Morgan-Prager</i> 7/18/06 SIGNATURE OF AUTHORIZED PERSON DATE</p>	<p>Patrick J. Talamantes - <i>Executive Vice President</i> TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON</p> <p>Karole Morgan-Prager - <i>Executive Vice President</i> TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON <i>Assistant Corporate Secretary</i></p>
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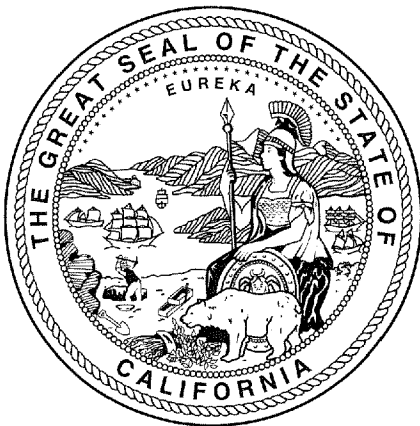




State of California Secretary of State

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That the attached transcript of _____ 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

JUL 21 2006

BRUCE McPHERSON
Secretary of State

200620210348



State of California Secretary of State

File # ENDORSED - FILED in the office of the Secretary of State of the State of California JUL 21 2006 This Space For Filing Use Only

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION - CONVERSION

IMPORTANT -- Read all instructions before completing this form.

CONVERTED ENTITY INFORMATION

1. NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," "Ltd. Liability Company," "Ltd. Liability Co.," or the abbreviation "LLC" or "L.L.C.") Contra Costa Newspapers, LLC
2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.
3. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (Check only one) [X] MORE THAN ONE MANAGER
4. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE 2640 Shadelands Drive Walnut Creek, CA 94598-2578
5. NAME OF AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and both items 5 and 6 must be completed. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and item 5 must be completed (leave item 6 blank).) C T Corporation System
6. IF AN INDIVIDUAL, ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA CITY STATE ZIP CODE CA

CONVERTING ENTITY INFORMATION

7. NAME OF CONVERTING ENTITY Contra Costa Newspapers, Inc.
8. FORM OF ENTITY Corporation
9. JURISDICTION California
10. CA SECRETARY OF STATE FILE NUMBER, IF ANY C0459204
11. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS
STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS
Common Stock - 17,755.17 shares 100%

ADDITIONAL INFORMATION

12. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

13. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

Signature of Patrick J. Talemantas dated 7/18/06
Signature of Karole Morgan-Prager dated 7/18/06

Patrick J. Talemantas - Executive Vice President
Karole Morgan-Prager - Executive Vice President Assistant Corporate Secretary

LLC-1A (REV 06/2005)

APPROVED BY SECRETARY OF STATE





State of California

Secretary of State

L

STATEMENT OF INFORMATION (Limited Liability Company)

Filing Fee \$20.00. If amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME (Please do not alter if name is preprinted.)

This Space For Filing Use Only

DUE DATE: OCT 27 2008

FILE NUMBER AND STATE OR PLACE OF ORGANIZATION

2. SECRETARY OF STATE FILE NUMBER

3. STATE OR PLACE OF ORGANIZATION

COMPLETE ADDRESSES FOR THE FOLLOWING (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY AND STATE ZIP CODE

5. CALIFORNIA OFFICE WHERE RECORDS ARE MAINTAINED (DOMESTIC ONLY) CITY STATE ZIP CODE

CA

NAME AND COMPLETE ADDRESS OF THE CHIEF EXECUTIVE OFFICER, IF ANY

6. NAME ADDRESS CITY AND STATE ZIP CODE

NAME AND COMPLETE ADDRESS OF ANY MANAGER OR MANAGERS, OR IF NONE HAVE BEEN APPOINTED OR ELECTED, PROVIDE THE NAME AND ADDRESS OF EACH MEMBER (Attach additional pages, if necessary.)

7. NAME ADDRESS CITY AND STATE ZIP CODE

8. NAME ADDRESS CITY AND STATE ZIP CODE

9. NAME ADDRESS CITY AND STATE ZIP CODE

AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California address. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 11 must be left blank.)

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY STATE ZIP CODE

CA

TYPE OF BUSINESS

12. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

SIGNATURE

TITLE

DATE