504404730 06/08/2017

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4451427

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

CONVEYING PARTY DATA

Name	Execution Date
CLEAR CHANNEL MANAGEMENT SERVICES, INC.	09/16/2014

RECEIVING PARTY DATA

Name:	IHEARTMEDIA MANAGEMENT SERVICES, INC.
Street Address:	200 EAST BASSE ROAD
City:	SAN ANTONIO
State/Country:	TEXAS
Postal Code:	78209

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	15617700

CORRESPONDENCE DATA

Fax Number: (888)800-6752

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: 225-241-3641

Email: kam@texaspatents.com
Correspondent Name: GARLICK & MARKISON

Address Line 1: 106 E. 6TH STREET, SUITE 900

Address Line 4: AUSTIN, TEXAS 78701

ATTORNEY DOCKET NUMBER:	414-OMR-08-2008
NAME OF SUBMITTER:	KATHRYN A. MCCROSSEN
SIGNATURE:	/Kathryn A. McCrossen/
DATE SIGNED:	06/08/2017

Total Attachments: 4

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PATENT 504404730 REEL: 042740 FRAME: 0483



Office of the Secretary of State

CERTIFICATE OF FILING OF

iHeartMedia Management Services, Inc. 801066121

[formerly: Clear Channel Management Services, Inc.]

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Amendment for the above named entity has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 09/16/2014

Phone: (512) 463-5555

Prepared by: Kika Garza

Effective: 09/16/2014



NANDITA BERRY

Nandita Berry Secretary of State 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



Certificate of Amendment

This space reserved for office use.

In the Office of the Secretary of State of Texas

SEP 16 2014

Corporations Section

Entity Information

The name of the filing entity is:					
Clear Channel Management Services, Inc.	. •				
State the name of the entity as currently shown in the of the entity, state the old name and not the new name	records of the secretary of state. If the amendment changes the name				
The filing entity is a: (Select the appropriate entity ty	pe below.)				
□ For-profit Corporation	Professional Corporation				
☐ Nonprofit Corporation	oration 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: 801066121				
The date of formation of the entity is:	12/22/2008				
-					
A	mendments				
	Amended Name is to change the name of the entity, use the following statement)				
•	rmation to change the article or provision that names the				
The name of the filing entity is: (state the nex	w name of the entity below)				
iHeartMedia Management Services, Inc.					
The name of the entity must contain an organizational desig	nation or accepted abbreviation of such term, as applicable.				
2. Amended Regis	stered Agent/Registered Office				
The amendment changes the certificate of	formation to change the article or provision stating the				

Form 424

provision is amended to read as follows:

name of the registered agent and the registered office address of the filing entity. The article or

PATENT REEL: 042740 FRAME: 0485

(Complete eit		ered Agent out not both. A	so complete C.)		
A. The registered agent is an organ	nization (ca	nnot be entity na	med above) by the	name o	f:
OR B. The registered agent is an indiv	idual resid	ent of the sta	ate whose name	is:	
First Name M.I	<u> </u>	Last Name	30524		Suffix
The person executing this instrument has consented to serve as registered ag		at the persor	designated as t	the new	registered agent
C. The business address of the register	red agent a	nd the regist	ered office addre	ess is:	
		···		TX	
Street Address (No P.O. Box)		City		State	Zip Code
3. Other Ac	ided, Alter	red, or Dele	ted Provisions		
Other changes or additions to the certificate of is insufficient, incorporate the additional text form for further information on format.					
Text Area (The attached addendum, if any, is incorpo	orated herein b	y reference.)			•
Add each of the following provision reference of the added provision and the	ns to the cone full text	ertificate of are as follow	formation. The i	dentific	ation or
			•		•
				,	
		· · · · · · · · · · · · · · · · · · ·			
Alter each of the following provision reference of the altered provision and t					
Lucia Company					
Delete each of the provisions identified	ified below	from the ce	rtificate of forma	ation.	

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.)

A. This document becomes effective when the document is filed by the secretary of state.
B. This document becomes effective at a later date, which is not more than ninety (90) days from
the date of signing. The delayed effective date is:
C. This document takes effect upon the occurrence of a future event or fact, other than the
passage of time. The 90 th day after the date of signing is:
The following event or fact will cause the document to take effect in the manner described below:
Evenoution
Execution
The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is
authorized under the provisions of law governing the entity to execute the filing instrument.
Date: 09/11/2014
By:
Signature of authorized person
. Hamlet T. Newsom Jr., Vice President

Printed or typed name of authorized person (see instructions)

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