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U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Travel Technologies Group, LLC

- Individual(s) Association General Partnership Limited Partnership Corporation-State Other limited liability corporation

Additional name(s) of conveying party(ies) attached? Yes No

3. Nature of conveyance:

- Assignment Merger Security Agreement Change of Name Other

Execution Date: December 30, 1999

2. Name and address of receiving party(ies)

Name: Travel Technologies Group, L.P.

Internal Address:

Street Address: 6 West Druid Hills Drive

City: Atlanta State: GA ZIP: 30329

- Individual(s) citizenship Association General Partnership Limited Partnership Georgia Corporation-State Other

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No

(Designations must be a separate document from assignment)

Additional name(s) & address(es) attached? Yes No

4. Application number(s) or patent number(s):

A. Trademark Application No.(s)

75/718, 235

B. Trademark Registration No.(s)

Additional numbers attached? Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Barbara Mills

Internal Address:

Street Address: 4182 Powers Ferry Rd.

City: Atlanta State: GA ZIP: 30342

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 3.41).....\$160.00

- Enclosed at cost recordation fee of \$120 + \$40 for name change recordation Authorized to be charged to deposit account

8. Deposit account number:

(Attach duplicate copy of this page if paying by deposit account)

05/12/2000 TTOM11 00000001 75718235

DO NOT USE THIS SPACE

01 FC:481 40.00 DP

02 FC:484 120.00 DP

9. 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.

Barbara Mills

Name of Person Signing

Handwritten signature

Signature

May 5, 2000 Date

Total number of pages including cover sheet, attachments, and document: 9

Mail documents to be recorded with required cover sheet information to: Commissioner of Patents & Trademarks, Box Assignments Washington, D.C. 20231

# Secretary of State

## Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 001181264  
CONTROL NUMBER : 0000375  
DATE INC/AUTH/FILED: 12/30/1999  
JURISDICTION : GEORGIA  
PRINT DATE : 04/27/2000  
FORM NUMBER : 215

STONE LAW ASSOCIATES INC.  
DEBORAH L. STONE  
555 NORTH POINT CENTER STE 400  
ALPHARETTA, GA 30022

### CERTIFIED COPY

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents filed under the name of

**TRAVEL TECHNOLOGIES GROUP, L.P.  
A DOMESTIC LIMITED PARTNERSHIP**

Said entity was formed in the jurisdiction set forth above and has filed in the Office of Secretary of State on the date set forth above its certificate of limited partnership, articles of incorporation, articles of association, articles of organization or application for certificate of authority to transact business in Georgia.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.



A handwritten signature in black ink, appearing to read "Cathy Cox".

Cathy Cox  
Secretary of State

**TRADEMARK**  
**REEL: 002037 FRAME: 0377**

# Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0000375  
EFFECTIVE DATE : 12/30/1999  
COUNTY : FULTON  
REFERENCE : 0045  
PRINT DATE : 01/04/2000  
ELECTED CONTROL : K901331  
FORM NUMBER : 358

JEFFREY K. HAIDET  
303 PEACHTREE ST.  
SUITE 5300  
ATLANTA, GA 30308

## CERTIFICATE OF LIMITED PARTNERSHIP BY ELECTION

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### TRAVEL TECHNOLOGIES GROUP, L.P. A DOMESTIC LIMITED PARTNERSHIP

has been duly organized under the laws of the State of Georgia on the effective date stated above by the filing of a certificate of election and certificate of limited partnership in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.



Cathy Cox  
Secretary of State

TRADEMARK  
REEL: 002037 FRAME: 0378

**CERTIFICATE OF LIMITED PARTNERSHIP**  
**OF**  
**TRAVEL TECHNOLOGIES GROUP, L.P.**

The undersigned, desiring to form a limited partnership pursuant to the provisions of the Revised Uniform Limited Partnership Act of the State of Georgia, hereby certify the following:

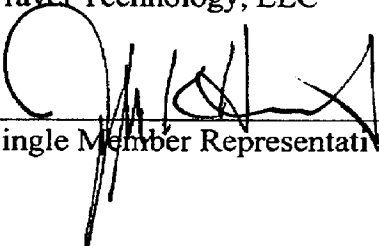
1. The name of the Partnership is "Travel Technologies Group, L.P."
2. The Partnership is a limited partnership.
3. The registered office of the Partnership shall be located in Fulton County, Georgia at 303 Peachtree Street, Suite 5300, Atlanta, Georgia 30308 or at such other place as the General Partners shall from time to time designate. The registered agent of the Partnership at such address is Jeffrey K. Haidet.
4. The name and business address of the General Partner is:

Travel Technology, LLC  
6 W. Druid Hills Drive  
Atlanta, Georgia 30329

**IN WITNESS WHEREOF**, the undersigned General Partner has executed this Certificate as of the 30<sup>th</sup> day of December, 1999.

GENERAL PARTNER

Travel Technology, LLC

  
\_\_\_\_\_  
Single Member Representative

ATLANTA:4163469.1

**TRADEMARK**  
**REEL: 002037 FRAME: 0379**

**CERTIFICATE OF ELECTION OF TRAVEL TECHNOLOGIES GROUP, LLC**

The undersigned, Travel Technologies Group, LLC, a Georgia limited liability company (the "Company") does hereby certify that:

1. The Company elects to become a limited partnership (the "Partnership") pursuant to the provisions of O.C.G.A. §14-9-206.2. The name of such limited partnership shall be Travel Technologies Group, L.P.

2. The effective date and time of such election shall be as of the date hereof.

3. The election to become a limited partnership has been approved as required under O.C.G.A. §14-9-206.2(a).

4. A Certificate of Limited Partnership for the Partnership is filed with this Certificate. Such Certificate of Limited Partnership is in the form required by O.C.G.A. §14-9-201, sets forth a name for the Partnership that satisfies the requirement of O.C.G.A. §14-9-102, and shall be the Certificate of Limited Partnership of the Partnership.

5. A written Partnership Agreement has been entered into among the partners of the Partnership. Such Partnership Agreement will be effective immediately upon the effectiveness of the election described herein, and such Partnership Agreement provides for the manner and basis for converting the interest of the member in the Company into an interest as a partner of the Partnership.

IN WITNESS WHEREOF, the undersigned Managing Member has executed this document through its representative on this 30<sup>th</sup> day of December, 1999.

WORLD TRAVEL TECHNOLOGIES, LLC

By: \_\_\_\_\_

  
Timothy Severt  
Secretary

ATLANTA:4163456.1

**TRADEMARK**  
**REEL: 002037 FRAME: 0380**



OFFICE OF SECRETARY OF STATE  
CORPORATIONS DIVISION

Suite 315, West Tower, 2 Martin Luther King Jr., Drive  
Atlanta, Georgia 30334-1530  
(404) 656-2817

Registered agent, officer, entity status information on the Internet  
<http://www.sos.state.ga.us>

ROBERT RAY, JR.  
Assistant Secretary of State -  
Operations

WARREN H. RARY  
Director

CATHY COX  
Secretary of State

CERTIFICATE OF LIMITED PARTNERSHIP  
GEORGIA LIMITED PARTNERSHIP  
TRANSMITTAL FORM

12901331

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DOCKET #	40910	PENDING #	P311741	CONTROL #	375
DOCKET CODE	358	DATE FILED	12-30-99	AMOUNT RECEIVED	80.00
TYPE CODE	TD	EXAMINER	LS	JURISDICTION CODE	060
				CHECK RECEIPT #	126002

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM.

1. 40910  
Limited Partnership Name Reservation Number

Travel Technologies Group, L.P.  
Limited Partnership Name

2. Jeffrey K. Haidet  
Applicant/Attorney

303 Peachtree Street, Suite 5300  
Address

Atlanta GA 30308  
City State Zip Code

3. 6 West Druid Hills Drive  
Principal Office Mailing Address

Atlanta GA 30329  
City State Zip Code

4. Jeffrey K. Haidet  
Name of Registered Agent in Georgia

303 Peachtree Street, Suite 5300  
Registered Office Street Address in Georgia

Atlanta GA 30308  
City County State Zip Code

5. Attach list of Names and Business Addresses of each General Partner.

6. For Limited Partnerships formed prior to July 1, 1988 ONLY:  
Date Formed: County: Book No: Page No:

7. NOTICE: THIS FORM DOES NOT REPLACE THE CERTIFICATE OF LIMITED PARTNERSHIP REQUIRED BY TITLE 14 OF THE OFFICIAL CODE OF GEORGIA ANNOTATED. Mail or deliver this Transmittal Form, the original and one copy of the Certificate of Limited Partnership, and the Secretary of State filing fee of \$60.00 to the Secretary of State at the above address. Filing fees are NON-refundable

I understand that the information on this form will be entered in the Secretary of State business entity database, and I verify that the above information is true and correct to the best of my knowledge.

[Signature]  
Authorized Signature

12/30/99  
Date

Registered agent, officer, entity status information on the Internet: <http://www.sos.state.ga.us>

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