

09-27-2000



101473189

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

9.15.00

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

Submission Type		Conveyance Type	
<input checked="" type="checkbox"/> New		<input type="checkbox"/> Assignment	<input type="checkbox"/> License
<input type="checkbox"/> Resubmission (Non-Recordation)		<input type="checkbox"/> Security Agreement	<input type="checkbox"/> Nunc Pro Tunc Assignment
Document ID # <input type="text"/>			Effective Date
<input type="checkbox"/> Correction of PTO Error		<input type="checkbox"/> Merger	Month Day Year
Reel # <input type="text"/> Frame # <input type="text"/>		<input checked="" type="checkbox"/> Change of Name	<input type="text"/>
<input type="checkbox"/> Corrective Document		<input type="checkbox"/> Other <input type="text"/>	
Reel # <input type="text"/> Frame # <input type="text"/>			

Conveying Party Mark if additional names of conveying parties attached

Name Execution Date Month Day Year

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

75506288

Receiving Party Mark if additional names of conveying parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City State/Country Zip Code

Individual General Partnership Limited Partnership 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.)

Corporation Association

Other

Citizenship/State of Incorporation/Organization

09/26/2000 11:11:11 00000264 73506288
01 F:481 40.00 DP

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS

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

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

(212) 852-7250

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" value="75/506,288"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<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 indicated herein.

Cathy E. Shore-Sirotin

September 15, 2000

Name of Person Signing

Signature

Dated Signed

~~I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF~~
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "NEWS AMERICA FSI,
INC.", CHANGING ITS NAME FROM "NEWS AMERICA FSI, INC." TO "NEWS
AMERICA MARKETING FSI, INC.", FILED IN THIS OFFICE ON THE
THIRTIETH DAY OF JUNE, A.D. 1998, AT 9 O'CLOCK A.M.



Edward J. Freel

Edward J. Freel, Secretary of State

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981306419

AUTHENTICATION: 9237054

DATE: 08-05-98

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REEL: 002148 FRAME: 0131

CERTIFICATE OF AMENDMENT OF CERTIFICATE OF INCORPORATION

OF

NEWS AMERICA FSI, INC.

It is hereby certified that:

1. The name of the corporation (hereinafter called the "Corporation") is

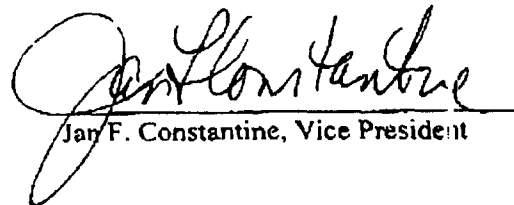
NEWS AMERICA FSI, INC.

2. The certificate of incorporation of the Corporation is hereby amended by striking out Article FIRST thereof and by substituting in lieu of the said Article the following new Article:

"FIRST: The name of the corporation is News America Marketing FSI, Inc."

3. The amendment of the certificate of incorporation herein certified has been duly adopted and written consent has been given in accordance with the provisions of sections 228 and 242 of the General Corporation Law of the State of Delaware.

Signed on the 30th day of June, 1998


Jan F. Constantine, Vice President

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RECORDED: 09/15/2000

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REEL: 002148 FRAME: 0132