

04-27-2001



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CORDATION FORM COVER SHEET
TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

3-26-01

SUNGARD RECOVERY SERVICES INC.

- Individual(s)
- General Partnership
- Corporation - Pennsylvania
- Other _____
- Association
- Limited Partnership

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

2. Name and address of receiving party(ies):

SUNGARD RECOVERY SERVICES L.P.

1285 Drummers Lane
Wayne, Pennsylvania 19087

- Individual(s) citizenship
- Association
- General Partnership
- Limited Partnership - Pennsylvania
- Corporation
- Other _____



03-26-2001

U.S. Patent & TMO/TM Mail Rcpt Dt. #72

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

(Designations must be a separate document from assignment)

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

3. Nature of Conveyance:

- Assignment
- Security Agreement
- Other - change of corporate form
- Merger
- Change of Name

Execution Date: December 27, 2000

4. Application number(s) or patent number(s) listed below

A. Trademark Application No.(s)
see attached schedule A

75/667609

B. Trademark Registration No.(s)
see attached schedule A

Additional numbers attached? Yes No

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

Name: GLENN A. GUNDERSEN
DECHERT
4000 BELL ATLANTIC TOWER
1717 ARCH STREET
PHILADELPHIA, PA. 19103-2793
TEL. NO. (215) 994-2183

6. Total number of applications and registrations involved: 19

7. Total fee (37 CFR 3.41)\$ 490.00

- Enclosed
- Authorized to be charged to deposit account
(Including any underpayment)

8. Deposit account number: 04-0475

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

DO NOT USE THIS SPACE

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.

James J. Johnston
Name of Person Signing

Signature

March 26, 2001

Date

Total number of pages including cover sheet, attachments, and document: [5]

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

Microfilm Number: _____

Filed with the Department of State on: _____

DEC-28 2000

Entity Number: 2980505

Kim Fitzgerald
Secretary of the Commonwealth

CERTIFICATE OF LIMITED PARTNERSHIP

DSCB:15-8511 (Rev 90)

In compliance with the requirements of 15 Pa.C.S. §8511 (relating to certificate of limited partnership), the undersigned, desiring to form a limited partnership, hereby certifies that:

- 1. The name of the limited partnership is: **SUNGARD RECOVERY SERVICES LP**

The (a) address of this limited partnership's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) 1285 Drummers Lane, Wayne, Chester County, PA 19087

(b) c/o

Name of Commercial Registered Office Provider

County

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

- 3. The name and business address of each general partner of the partnership is:

Name

Address

SunGard Computer Services Inc. 1285 Drummers Lane, Wayne, PA 19087

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

_____ The formation of the limited partnership shall be effective upon filing of this Certificate of Limited Partnership in the Department of State.

 ✓ The formation of the limited partnership shall be effective on: January 1, 2001 at 12:04 AM.

IN WITNESS WHEREOF, the undersigned general partner of the limited partnership has executed this Certificate of Limited Partnership this 27th day of December, 2000.

SUNGARD COMPUTER SERVICES INC.

By: Michael J. Ruene
Michael J. Ruene, Asst. Vice President

Microfilm Number _____

Filed with the Department of State on _____

Entity Number 2980505

Kim P. King
Secretary of the Commonwealth
JK

CERTIFICATE OF MERGER-LIMITED PARTNERSHIP

DSCB:15-8547 (Rev 90)

In compliance with the requirements of 15 Pa.C.S. § 8547 (relating to certificate of merger or consolidation), the undersigned limited partnership(s), desiring to effect a merger, hereby state that:

1. The name of the limited partnership surviving the merger is: SunGard Recovery Services LP

2. (Check and complete one of the following):

The surviving limited partnership is a domestic limited partnership and the (a) address of its current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) 1285 Drummers Lane Wayne PA 19087 Chester
Number and Street City State Zip County

(b) c/o: _____
Name of Commercial Registered Office Provider County

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

____ The surviving limited partnership is a qualified foreign limited partnership formed under the laws of _____ and the (a) address of its current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) _____
Number and Street City State Zip County

(b) c/o: _____
Name of Commercial Registered Office Provider County

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

____ The surviving limited partnership is a nonqualified foreign limited partnership formed under the laws of _____ and the address of its principal office under the laws of such domiciliary jurisdiction is:

Number and Street City State Zip

3. The name and the address of its current registered office in this Commonwealth or name of its commercial registered office provider and the county of venue of each other domestic limited partnership* and qualified foreign limited partnership which is a party to the plan of merger are as follows: *or corporation

Name of Limited Partnership Address of Registered Office or Name of Commercial Registered Office Provider County
SunGard Recovery Services Inc., 1285 Drummers Lane, Wayne, PA 19087 Chester
a PA corporation

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

___ The plan of merger shall be effective upon filing this Certificate of Merger in the Department of State.

The plan of merger shall be effective on: January 1, 2001 at 12:04 AM
Date Hour

5. The manner in which the plan of merger was adopted by each domestic limited partnership/^{or corporation} is as follows:

Name of Limited Partnership	Manner of Adoption
<u>SunGard Recovery Services LP</u>	<u>Consent of all partners</u>
<u>SunGard Recovery Services Inc.</u>	<u>Unanimous written consent of shareholders and directors</u>

6. (Strike out this paragraph if no foreign partnership is a party to the merger): The plan was authorized, adopted or approved, as the case may be, by the foreign limited partnership (or each of the foreign limited partnerships) party to the plan in accordance with the laws of the jurisdiction in which it is organized.

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

___ The plan of merger is set forth in full in Exhibit A attached hereto and made a part hereof.

Pursuant to 15 Pa.C.S. § 8547(b) (relating to omission of certain provisions from filed plans) the provisions, if any, of the plan of merger that amend or constitute the operative Certificate of Limited Partnership of the surviving limited partnership as in effect subsequent to the effective date of the plan are set forth in full in Exhibit A attached hereto and made a part hereof. the full text of the plan of merger is on file at the principal place of business of the surviving limited partnership, the address of which is:

<u>1235 Drummers Lane</u>	<u>Wayne</u>	<u>PA</u>	<u>19087</u>	<u>Chester</u>
Number and Street	City	State	Zip	County

IN TESTIMONY WHEREOF, each undersigned limited partnership has caused this Certificate of Merger to be signed by a duly authorized officer thereof this 27th day of December, 2000.

SUNGARD RECOVERY SERVICES LP
By: SunGard Computer Services Inc.,
General Partner

By: Michael J. Ruane
Michael J. Ruane, Asst. Vice President

SUNGARD RECOVERY SERVICES INC.

By: Michael J. Ruane
Michael J. Ruane, Asst. Vice President