

FORM PTO-1618A
Expires 06/30/99
OMB 0651-0027

U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

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

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

Conveying Party Mark if additional names of conveying parties attached

Name Effective Date
 Month Day Year

Formerly

Individual General Partnership Limited Partnership Corporation Association

Other

Citizenship/State of Incorporation/Organization

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

Corporation Association

Other

Citizenship/State of Incorporation/Organization

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.)

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

FORM PTO-1618B
Expires 06/30/99
OMB 0651-0027

U.S. Department of Commerce
Patent and Trademark Office
TRADEMARK

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

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="76/074552"/>	<input type="text" value="76/074551"/>	<input type="text" value="76/089474"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="76/089425"/>	<input type="text" value="76/074550"/>	<input type="text" value="76/074697"/>	<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 account)


Deposit Account Number

Authorization to charge additional fees: Yes No

Statement and Signature

To the best of my knowledge and belief, the foregoing 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.

Jeffrey G. Mote
Name of Person Signing


Signature

7/29/02
Date Signed

Delaware

PAGE 1

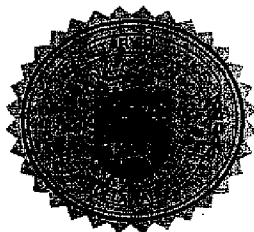
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF OWNERSHIP, WHICH MERGES:

"IDINE.COM, INC.", A DELAWARE CORPORATION,

WITH AND INTO "TRANSMEDIA NETWORK INC." UNDER THE NAME OF "IDINE REWARDS NETWORK INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE THE THIRTIETH DAY OF JANUARY, A.D. 2002, AT 9:12 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



2128803 8100M

020063777

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1590286

DATE: 01-31-02

TRADEMARK

REEL: 002517 FRAME: 0231

CERTIFICATE OF OWNERSHIP AND MERGER

MERGING

IDINE.COM, INC.

INTO

TRANSMEDIA NETWORK INC.

(Pursuant to Section 253 of the General Corporation Law of Delaware)

TRANSMEDIA NETWORK INC., a Delaware corporation (the "Corporation"), hereby certifies as follows:

FIRST: The Corporation is incorporated under the General Corporation Law of the State of Delaware.

SECOND: The Corporation owns all of the outstanding shares of the capital stock of iDine.com, Inc., a Delaware corporation (the "Subsidiary").

THIRD: The Corporation, by the following resolutions duly adopted by its Board of Directors on November 13, 2001, has determined to merge the Subsidiary with and into the Corporation pursuant to Section 253 of the General Corporation Law of the State of Delaware, effective immediately upon filing of this Certificate of Ownership and Merger with the Secretary of State of Delaware:

RESOLVED, that this Board hereby deems it advisable and in the best interests of the Corporation that the Corporation merge its wholly-owned subsidiary, iDine.com, Inc., with and into the Corporation.

RESOLVED, that the Corporation shall be the surviving corporation and shall continue as a corporation organized and existing under the laws of the State of Delaware, and that, at the effective time of the merger, the Corporation shall change its corporate name by amending Article FIRST of the Certificate of Incorporation of the Corporation to read in its entirety as follows:

FIRST: Name. The name of the corporation is iDine Rewards Network Inc.

STATE OF DELAWARE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
FILED 09:12 PM 01/30/2002
020063777 - 2128803

(NY)1350112.1

TRADEMARK

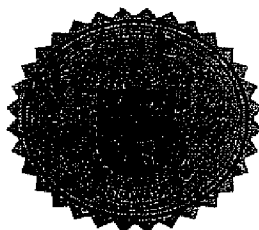
REEL: 002517 FRAME: 0232

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "TRANSMEDIA NETWORK INC.", FILED A CERTIFICATE OF OWNERSHIP, CHANGING ITS NAME TO "IDINE REWARDS NETWORK INC.", THE THIRTIETH DAY OF JANUARY, A.D. 2002, AT 9:12 O'CLOCK P.M.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

2128803 8320

AUTHENTICATION: 1608005

020090836

DATE: 02-12-02

TRADEMARK

RECORDED: 07/30/2002

REEL: 002517 FRAME 0235