

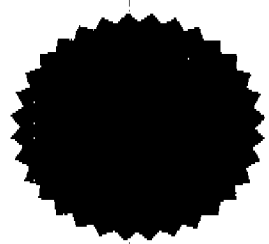
Form PTO-1594 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002)		RECORDATION FORM COVER SHEET TRADEMARKS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
Tab settings					
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies): DLC Acquisition Corp. <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State <input type="checkbox"/> Other Delaware			2. Name and address of receiving party(ies) Name: DLC Corp. Internal Address: 16th Floor Street Address: 650 Madison Avenue City: New York State: NY Zip: 10022 <input type="checkbox"/> Individual(s) citizenship <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State Delaware <input type="checkbox"/> Other		
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other Execution Date: August 10, 1998					
4. Application number(s) or registration number(s): A. Trademark Application No.(s)			B. Trademark Registration No.(s) 1,911,913; 1,915,565; and 1,748,945		
			Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Robert M. Wasnofski, Jr. Internal Address: Street Address BAKER BOTTS L.L.P. 30 Rockefeller Plaza 44th Floor City: New York State: NY Zip: 10112			6. Total number of applications and registrations involved: 3		
			7. Total fee (37 CFR 3.41).....\$ 90.00 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account		
			8. Deposit account number: 02-4377 (Attach duplicate copy of this page if paying by deposit account)		
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9. Statement and signature. <i>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.</i> Robert M. Wasnofski, Jr. 9/30/02 Name of Person Signing Signature Date					
Total number of pages including cover sheet, attachments, and document: 2					

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

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "DLC ACQUISITION CORP.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "DLC CORP.", THE TENTH DAY OF AUGUST, A.D. 1998, AT 9 O'CLOCK A.M.



Harriet Smith Windsor
 Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 1646650

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DATE: 09/30/2002

RECORDED: 09/30/2002

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