

TRADEMARK ASSIGNMENT

Electronic Version v1.1
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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	05/22/2008

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Strohl Systems Group, Inc.		05/21/2008	CORPORATION: PENNSYLVANIA

RECEIVING PARTY DATA

Name:	SunGard Availability Services LP
Street Address:	680 E. Swedesford Road
City:	Wayne
State/Country:	PENNSYLVANIA
Postal Code:	19087
Entity Type:	LIMITED PARTNERSHIP: PENNSYLVANIA

PROPERTY NUMBERS Total: 14

Property Type	Number	Word Mark
Serial Number:	77423539	CONTINUITY CONNEXION
Registration Number:	3480279	
Registration Number:	3471155	PLAN. PRACTICE. PREVAIL.
Serial Number:	78860653	PLAN NAVIGATOR
Registration Number:	2804464	NOTIFIND
Registration Number:	2802054	NOTIFIND
Registration Number:	2794345	RECOVERY CHRONICLES
Registration Number:	2771377	INCIDENT MANAGER
Registration Number:	2816397	STROHL SYSTEMS
Registration Number:	2617814	BIA PROFESSIONAL
Registration Number:	2536673	LDRPS
Registration Number:	2477407	
Registration Number:	2385557	

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Registration Number: 2606341 PLANET

CORRESPONDENCE DATA

Fax Number: (215)655-2617

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: 215.994.2617

Email: james.johnston@dechert.com, jacob.bishop@dechert.com,
trademarks@dechert.com

Correspondent Name: James Johnston

Address Line 1: Dechert LLP

Address Line 2: Cira Centre, 2929 Arch Street

Address Line 4: Philadelphia, PENNSYLVANIA 19104-2808

ATTORNEY DOCKET NUMBER: 283276

NAME OF SUBMITTER: James Johnston

Signature: /James Johnston/

Date: 10/31/2008

Total Attachments: 4

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
CORPORATION BUREAU
206 NORTH OFFICE BUILDING
P.O. BOX 8722
HARRISBURG, PA 17105-8722
WWW.CORPORATIONS.STATE.PA.US/CORP

SUNGARD AVAILABILITY SERVICES LP

THE CORPORATION BUREAU IS HAPPY TO SEND YOU YOUR FILED DOCUMENT. THE CORPORATION BUREAU IS HERE TO SERVE YOU AND WANTS TO THANK YOU FOR DOING BUSINESS IN PENNSYLVANIA.

IF YOU HAVE ANY QUESTIONS PERTAINING TO THE CORPORATION BUREAU, PLEASE VISIT OUR WEB SITE LOCATED AT WWW.CORPORATIONS.STATE.PA.US/CORP OR PLEASE CALL OUR MAIN INFORMATION TELEPHONE NUMBER (717)787-1057. FOR ADDITIONAL INFORMATION REGARDING BUSINESS AND / OR UCC FILINGS, PLEASE VISIT OUR ONLINE "SEARCHABLE DATABASE" LOCATED ON OUR WEB SITE.

ENTITY NUMBER: 2980505

CT CORPORATION SYSTEM
100 Pine Street, Suite 325
Harrisburg, PA 17101

TRADEMARK
REEL: 003880 FRAME: 0675

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU

Articles/Certificate of Merger

(15 Pa.C.S.)

- Domestic Business Corporation (§ 1926)
 Domestic Nonprofit Corporation (§ 5926)
 Limited Partnership (§ 8547)

Name	
Address	
City	State

CT - COUNTER

Document will be returned to the name and address you enter to the left.

Commonwealth of Pennsylvania
ARTICLES OF MERGER-BUSINESS 4 Page(s)



T0814447133

Fee: \$150 plus \$40 additional for each Party in additional to two

In compliance with the requirements of the applicable provisions (relating to articles of merger or consolidation), the undersigned, desiring to effect a merger, hereby state that:

1. The name of the corporation/limited partnership surviving the merger is:
SunGard Availability Services LP

2. Check and complete one of the following:

The surviving corporation/limited partnership is a domestic business/nonprofit corporation/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) Number and Street	City	State	Zip	County
680 E. Swedesford Road,	Wayne, PA		19087	Chester

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

The surviving corporation/limited partnership is a qualified foreign business/nonprofit corporation /limited partnership incorporated/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
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(b) Name of Commercial Registered Office Provider _____ County _____
c/o _____

The surviving corporation/limited partnership is a nonqualified foreign business/nonprofit corporation/limited partnership incorporated/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
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DSCB: 15-1926/5926/8547-3

IN TESTIMONY WHEREOF, the undersigned corporation/limited partnership has caused these Articles/Certificate of Merger to be signed by a duly authorized officer thereof this

21st day of May
2008

SunGard Availability Services LP

Name of Corporation/Limited Partnership

V. E. Silbey
Signature

Victoria E. Silbey, Vice President

Title

Strohl Systems Group, Inc.

Name of Corporation/Limited Partnership

Leslie S. Brush
Signature

Leslie S. Brush, Asst. Vice President

Title