FORM PTO-1594 REI (Rev. 03/01) OMB No. 0651-0027 (exp. 05/31/2002) To the Honorable Commissioner of 10211	U.S. DEPARTMENT OF COMMER
To the Honorable Commissioner of 10211	
To the Honorable Commissioner of 10211	Patent and Trademark Of
To the Honorable Commissioner of 1021.	ce73
d Name of account to the control of	6673 Trease record the attached original documents or copy thereof.
1. Name of conveying party(les).	2. Name and address of receiving party(ieth) Name: IKIMBRO, INC. Internal Address: Street Address: 500 HUNTMAR PARK DRIVECT
Silicon Valley Bank	Name: IKIMBRO, INC.
3003 Tasman Drive-HA155 Santa Clara, CA 95054 6 - 4 - 0 2	Internal Address:
Salita Ciara, CA 95054	Street Address: 500 HUNTMAR PARK DRIVER
☐ Individual(s) ☐ Association	Supervision of the state of the
General Partnership Limited Partnership	
Corporation- State: Delaware Other	
Additional name(s) of conveying party(ies) attached? ☐Yes ☒ No	
Additional fiame(s) of conveying party(les) attached? [] Les [3] No	City: HERNDON State: VA ZIP: 20170
3. Nature of conveyance:	- Oute. Vit
o. Hataro er serroyanse.	☐ Individual(s) citizenship
☐ Assignment ☐ Merger	Association
	General Partnership
Security Agreement Change of Name	Limited Partnership
☑ Other Release	
Villet resease	If assignee is not domiciled in the United States, a domestic representa
	designation is attached: Yes No
Execution Date: 05/16/2002	Additional name(s) & address(es) attached? ☐ Yes ☒ No
4. Application number(s) or registration number(s):	
4. Application number(s) or registration number(s).	
A. Trademark Application No.(s)	B. Trademark No.(s)
75/912,516 75/912,515	
75/912,792 75/912,797	
75,912,793 75/912,513	
75/912,517 75/912,518	
75/912,514	
	attached? ☐ Yes ☒ No
5. Name and address of party to whom correspondence	6. Total number of applications and registrations involved:
concerning document should be mailed:	
Name: Silicon Valley Bank	7. T-4-16 (27. OFD 2.44). \$240.00
Internal Address: Loan Documentation HA155	7. Total fee (37 CFR 3.41): \$240.00 ☐ Enclosed
Internal Address. Loan Documentation That 100	Z Elisiosod
	Authorized to be charged to deposit account
Street Address: 3003 Tasman Dr.	
Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054	
	8. Deposit account number:
City: Santa Clara State: Ca ZIP: 95054	Deposit account number: (Attach duplicate copy of this page if paying by deposit account)
City: Santa Clara State: Ca ZIP: 95054	8. Deposit account number:
City: Santa Clara State: Ca ZIP: 95054 7/2002 TDIAZ1 00000094 75912516 1481 40.00 DP	Deposit account number: (Attach duplicate copy of this page if paying by deposit account)
City: Santa Clara State: Ca ZIP: 95054 7/2002 TDIAZ1 00000094 75912516 1481 40.00 DP	Deposit account number: (Attach duplicate copy of this page if paying by deposit account)
City: Santa Clara State: Ca ZIP: 95054 7/2002 TD AZ1 00000094 75912516 40.00 DP 200.00/ UP	Deposit account number: (Attach duplicate copy of this page if paying by deposit account)
City: Santa Clara State: Ca ZIP: 95054 7/2002 TD AZ1 00000094 75912516 40.00 DP 9. Statement and signature.	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) SE THIS SPACE
City: Santa Clara State: Ca ZIP: 95054 7/2002 TD AZ1 00000094 75912516 40.00 DP 200.00/ UP	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) SE THIS SPACE
City: Santa Clara State: Ca ZIP: 95054 7/2002 TDIAZI 00000094 75912516 2481 40.00 OP 200.00 OP 9. Statement and signature.	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) SE THIS SPACE
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City: Santa Clara State: Ca ZIP: 95054 7/2002 TD AZ1 00000094 75912516 40.00 DP 9. Statement and signature.	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) SE THIS SPACE and correct and any attached copy is a true copy of the original document. SHUIOA SIUIOA
City: Santa Clara State: Ca ZIP: 95056 7/2002 TDIAZ1 00000094 75912516 40.00 DP 9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and an account of the statement and signature.	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) SE THIS SPACE and correct and any attached copy is a true copy of the original document.

Mail documents to be recorded with required cover sheet information to:

Commissioner of Patent & Trademarks, Box Assignments

Washington, D.C. 20231

RELEASE OF SECURITY AGREEMENT COVERING INTERESTS IN TRADEMARKS

Silicon Valley Bank ("Secured Party"), hereby releases its security interest in the interests of **Ikimbro**, **Inc.** ("Assignor") in the trademarked works set forth in that certain **Intellectual Property And Security Agreement** dated, <u>February 28, 2000</u> executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on <u>March 09, 2000</u>, Reel 002055, Frame 0409.

Dated: May 16, 2002

SILICON VALLEY BANK

Name: Title:

h:\docs\ipagrmts\3release

RECORDED: 06/04/2002

TRADEMARK REEL: 002521 FRAME: 0235