FORM PTO-1594 RECORI	U.S. DEPARTMENT OF COMME
(Rev. 03/01) Th. 1029	U.S. DEPARTMENT OF COMME Patent and Trademark (
Name of conveying party(ies):	: Please record the attached original documents or copy thereof. 2. Name and address of receiving party(ies):
Silicon Valley Bank	Name: Fullscope, Inc.
3003 Tasman Drive-HA155 Santa Clara, CA 95054	Internal Address:
	Street Address: 912 North Main Straet ###0
│ Individual(s) │ Association │ General Partnership │ Limited Partnership	王 为 当
☐ Certefal Partiership ☐ Corporation- State: Delaware ☐ Other	
	Internal Address: Street Address: 912 North Main Straet ##00
Additional name(s) of conveying party(ies) attached? ☐Yes ☒ No	City: Ann Arbor State: MI ZIP: 48104
3. Nature of conveyance:	
	Individual(s) citizenship
☐ Assignment ☐ Merger	☐ Association ☐ General Partnership
Security Agreement	Limited Partnership
☑ Other Release	☐ Corporation-State
	If assignee is not domiciled in the United States, a domestic represent
Execution Date: 1/5/2005	designation is attached: ☐ Yes ☒ No Additional name(s) & address(es) attached? ☐ Yes ☒ No
A. Tridemark Application No.(s) 78/277,619 78/277,616	B. Trademark No.(s)
78/277,615	
. Additional numbers a	attached? ☐ Yes ⊠ No
5. Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and registrations involved:
Name: Silicon Valley Bank	
	7. Total fee (37 CFR 3.41): \$90.00 ☐ € €
Internal Address: Loan Documentation HA155	
	Authorized to be charged to deposit account
Street Address: 3003 Tasman Dr.	
	8. Deposit account number:
Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account)
Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account)
Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account)
Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054 DO NOT USE	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) E THIS SPACE
Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054 DO NOT USE 9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and	8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) E THIS SPACE d correct and any attached copy is a true copy of the original document.

Total number of pages including cover sheet, attachments, and document 3

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 **Fullscope**, **Inc.** ("Assignor") in the trademarked works set forth in that certain **Intellectual Property And Security Agreement** dated, <u>August 22, 2003</u> executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on <u>2/9/2004</u>, Reel <u>002913</u> Frame <u>0178</u>.

Dated: January, 5, 2005

SILICON VALLEY BANK

By: <u>Ma</u>
Name: M

Musice Artegar

Title:

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RECORDED: 02/08/2005

TRADEMARK
REEL: 003117 FRAME: 0858