FORM PTO-1594 U.S. DEPARTMENT OF COM	03-17-2005	
102960908 To the Honorable Commissioner or Hatenis and Trademarks. Please record the attached original documents or copy thereof.		
To the Honorable Commissioner or Patents and Trademarks. Please record the attached original documents or copy thereof. 1. Name of conveying party(ies): 1. Name of conveying party(ies): 1. Name of conveying party(ies): 1. Name and address of receiving party(ies): 1. Name and address of receiving party(ies): 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Name and address of party to whom correspondence concerning document should be mailed: 1. Total fee (37 CFR 3.41): 1. Additional number: 1. Authorized to be charged to deposit account count count number: 1. Authorized to be charged if paying by deposit account paying by deposit account number: 1. Authorized to be charged if paying by deposi	(Rev. 03/01)	Patent and Trademark Office
To the Honorable Commissioner or Hatents and Trademarks: Please record the attached organic abduments of copy thereof. Name of conveying party(les): Silicon Valley Bank Santa Clara, CA 95034 Individual(s) Association General Partnership Limited Partnership Corporation- State: Delaware Other Additional name(s) of conveying party(les) attached? Yes No Assignment Merger Association General Partnership Limited Partnership Association General Partnership Corporation- State: CO ZIP: 80112 Assignment Merger Individual(s) citizenship Association General Partnership Corporation- State CO ZIP: 80112 Assignment Change of Name Individual(s) citizenship Association General Partnership Corporation- State Corporation- State Other Release Individual(s) citizenship Association General Partnership Corporation- State Corporation- State Other Release Individual(s) citizenship Association General Partnership Corporation- State Corporation- State Other Release Individual(s) citizenship Association General Partnership Corporation- State Corporation- State Other Release Individual(s) citizenship Association General Partnership Corporation- State Corporation- State Corporation- State Other Release Individual(s) citizenship Association General Partnership Corporation- State Corporat		
Name TECTONIC SOLUTIONS INC Internal Address: 98 INVERNESS DR. E. STE 370 Individual(s)	To the Honorable Commissioner or Patents and Trademarks: P	lease record the attached original documents or copy thereor.
Internal Address: Santa Clara, CA 95054 Internal Address: 98 INVERNESS DR. E. STE 370 Internal Address: 98 INVERNESS DR.		
Santa Clara, CA 95054 Individual(s)		
Individual(s)		Internal Address.
General Partnership Corporation-State: Delaware	Santa Glara, GA 30004	Street Address: 98 INVERNESS DR. E. STE 370
Corporation- State: Delaware	1 11/01/10001(0)	
Additional name(s) of conveying party(ies) attached? \ Yes \ No 3. Nature of conveyance: \ Assignment \ Merger \ Association \ Security Agreement \ Change of Name \ Limited Partnership \ Corporation-State \ Other Release \ Tassignes is not domicided in the United States, a domestic representation Date: 3-1-05 \ A. Application number(s) or registration number(s): \ A. Trademark Application No.(s) \ B. Trademark No.(s) \ B. Trademark No.(s) \ Solution and address of party to whom correspondence concerning document should be mailed: \ Name: Silicon Valley Bank \ Internal Address: Loan Documentation HA155 \ Street Address: 3003 Tasman Dr. \ City: Santa Clara State: Ca ZIP: 95054 \ Do Not USE THIS SPACE \ City: ENGLEWOOD State: CO ZIP: 80112 \ Individual(s) citizenship \ Association \ Individual(s) citizenship \ Association \ Ceneral Partnership \ Limited Partnership \ Limited Partnership \ Limited Partnership \ Corporation-State \ Ves No \ No Additional name(s) & address(es) attached? Yes No \ No Not use the United States, a domestic represent in the United States, and		
City: ENGLEWOOD State: CO ZIP: 80112 3. Nature of conveyance: Assignment Merger Association Additional nathesis Association Additional nathesis Additional nathesis Association Association Additional nathesis Association Additional nathesis Additi	⊠ Corporation- State: Delaware	
City: ENGLEWOOD State: CO ZIP: 80112 3. Nature of conveyance: Assignment	Additional name(s) of conveying party(ies) attached? ☐Yes ☒ No	
Assignment Merger Security Agreement Change of Name Limited Partnership Limited Partnership Limited Partnership Limited Partnership Corporation-State Other Release Other Release Other fassinger is not domiciled in the United States, a domestic repres designation is attached: Yes No No No No No No No N		City: ENGLEWOOD State: CO ZIP: 80112
Assignment Merger Association General Partnership Limited Partnership Corporation-State Other Release Other Release Other Resease Other Other Resease Other Other Resease Other Other Resease Other	3. Nature of conveyance:	
General Partnership Limited Partnership Corporation-State Corporation-State Other Release Corporation-State Other Release Corporation-State Other Release Corporation-State Other Resease Other Resease Corporation-State Corporati		
Security Agreement	☐ Assignment ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	
Corporation-State Corporation Corporation-State Corporati	□Security Agreement □ Change of Name	
Fassignee is not domicided in the United States, a domestic repressed designation is attached: Yes No No No No No No No N	Change of Name	
designation is attached: Yes No No No No No No No N	☑ Other Release	Other
Additional name(s) & address(es) attached?		If assignee is not domiciled in the United States, a domestic representative
4. Application number(s) or registration number(s): A. Trademark Application No.(s) B. Trademark No.(s) 2670112 Additional numbers attached? ☐ Yes ☒ No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Silicon Valley Bank Internal Address: Loan Documentation HA155 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) DO NOT USE THIS SPACE	Execution Date: 3-1-05	Additional name(s) & address(es) attached? Yes No
A. Trademark Application No.(s) B. Trademark No.(s)	Execution Date: 0 1 00	
Additional numbers attached?	4. Application number(s) or registration number(s):	
Additional numbers attached?		
Additional numbers attached?	A. Trademark Application No.(s)	B. Trademark No.(s)
Additional numbers attached?		2670112
Additional numbers attached? Yes No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Silicon Valley Bank Internal Address: Loan Documentation HA155 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) DO NOT USE THIS SPACE		
Additional numbers attached? Yes No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Silicon Valley Bank Internal Address: Loan Documentation HA155 Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054 Do Not Use This space if paying by deposit account Do Not Use This space Additional numbers attached? Yes No 6. Total number of applications and registrations involved: 7. Total fee (37 CFR 3.41): \$40.00 Enclosed Authorized to be charged to deposit account 8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE		
Additional numbers attached?		
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Silicon Valley Bank Internal Address: Loan Documentation HA155 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) DO NOT USE THIS SPACE	A LUC Lucy Lucy Lucy Lucy Lucy Lucy Lucy Lucy	
Concerning document should be mailed: Name: Silicon Valley Bank Internal Address: Loan Documentation HA155 Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054 ZIP: 95054 8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE	Additional numbers att	ached? Thes Milvo
Concerning document should be mailed: Name: Silicon Valley Bank Internal Address: Loan Documentation HA155 Street Address: 3003 Tasman Dr. City: Santa Clara State: Ca ZIP: 95054 7. Total fee (37 CFR 3.41): \$ 40.00 Enclosed Authorized to be charged to deposit account 8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE	E Name and address of north to whom parroppondance	6. Total number of applications and registrations involved:
Name: Silicon Valley Bank Internal Address: Loan Documentation HA155 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) DO NOT USE THIS SPACE	concerning document should be mailed:	0. Total fulfiber of applications and registrations involved.
Internal Address: Loan Documentation HA155 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) DO NOT USE THIS SPACE	Concerning document should be mailed.	
Internal Address: Loan Documentation HA155 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) DO NOT USE THIS SPACE	Name: Silicon Valley Bank	
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) DO NOT USE THIS SPACE C:8521 Authorized to be charged to deposit account DO NOT USE THIS SPACE		
City: Santa Clara State: Ca ZIP: 95054 8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE FC:8521 40.00 0P	Internal Address: Loan Documentation HA155	⊠ Enclosed
City: Santa Clara State: Ca ZIP: 95054 8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE FC:8521 40.00 0P	Street Address: 3003 Tasman Dr.	Authorized to be charged to deposit account
8. Deposit account number: (Attach duplicate copy of this page if paying by deposit account) 16/2005 ECOOPER 00000013 2670112 FC:8521 40.00 OP		
(Attach duplicate copy of this page if paying by deposit account) /16/2005 ECOOPER 00000013 2670112 FC:8521 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE	City: Santa Clara State: Ca ZIP: 95054	
716/2005 ECOOPER 00000013 2670112 DO NOT USE THIS SPACE FC:8521 40.00 OP		
/16/2005 ECOOPER 00000013 2670112 FC:8521 40.00 OP	DO NOT USE	
	/16/2005 ECOOPER 00000013 2670112	
9. Statement and signature.	FC:8521 40.00 0P	
9. Statement and signature.		
	9. Statement and signature.	
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 docume	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.
	1	
Trisha Sedillo Justa Seallo 3/1/05 Nama of Person Signing Signature	Trisha Sedille Ilrisha A	Leab Clo 3/1/05
Name of Person Signing Signature 3/1/05 Date	Name of Person Signing Signat	ture Date
Total number of pages including cover sheet, attachments, and document	Total number of pages including cove	er sheet attachments and 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 Tectonic Solutions, Inc. ("Assignor") in the trademarked works set forth in that certain **Intellectual Property And Security Agreement** dated, May 17, 2004, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on June 14, 2004, Reel 2990, Frame 0636.

Dated: March 1, 2005

SILICON VALLEY BANK

By: Mauses digmeda

Name: MANDEL HAUVELLA Title: MANDEL HAUVELLA

h:\docs\ipagrmts\3release

RECORDED: 03/14/2005

TRADEMARK REEL: 003135 FRAME: 0387