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FORM PTO-1594	U.S. DEPARTMENT OF	
COMMERCE (Rev. 07/05) RECORDATION FORM COVER SHEET United States Patent and Trademark Office		
OMB No. 0651-0027 (exp. 06/30/2008)		
TRADEMARKS ONLY To the Director of the U.S. Petent and Trademark Office; Please record the attached documents or the new address(es) below.		
1. Name of conveying party(ies):	2. Name and address of receiving party(ies):	
Siticon Valley Bank 3003 Tasman Drive	Additional name(s) of conveying parties attached? Yes No	
Santa Clara, CA 95054	Name: CERTICOM CORP	
	Internal Address	
☐ Individual(s) ☐ Association		
☐ General Partnership ☐ Limited Partnership	Street Address: 393 VINTAGE PARK DRIVE SUITE 260	
☑ Corporation-State		
☐ Other	City: FOSTER CITY	
Additional come(s) of accuration and the state of the sta	State: CA	
Additional name(s) of conveying parties attached? ☐Yes ☒ No 3. Nature of conveyance/ Execution Date(s):	Country: USA Zip: 94404	
o. Mature of conveyance/ execution Date(s):	C.p. 34494	
Execution Date(s): October 7, 2008	Association Citizenship	
- Aggionment	General Partnership Citizenship	
Assignment Merger	☐ Limited Partnership Citizenship ☐ Corporation Citizenship :Canada	
Security Agreement Change of Name	Other Citizenship	
	If assignee is not domicited in the United States, a domestic representative designation is attached: Yes X No	
☑ Other: Release	(Designations must be a separate document from assignment)	
4. Application number(s) or registration number(s) and identification or description of the Trademark:		
A. Trademark Application No.(s)	B. Trademark Registration No.(s)	
	75015086 75729949 76137154	
	75094708 75901238 76137155	
	75253291 76137152 76176976 75727645 76137153 76219850	
C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown): Additional sheets attached? Additional sheets attached? Yes No		
5. Name and address of party to whom	6. Total number of applications and	
correspondence	registrations involved: 12	
concerning document should be mailed:		
Name: UCC Direct Services		
Internal Address: Attn: 14080632	7. Total fee (37 CFR 2.6 (b)(6) & 3.41): \$ 3 15 .000 Authorized to be charged by credit card	
Street Address: 187 Wolf Road, Suite 101	Authorized to be charged to deposit account Enclosed	
City: Albany State: NY ZIP: 12205	8. Payment Information:	
Phone Number: 1-800-342-3676 X 4065	a. Credit Card Last 4 Numbers 5683	
Eav Number 1-200 060 7040	Expiration Date 11/09	
Fax Number: 1-800-962-7049	b. Deposit Account Number	
Email Address: cls-udsalbany@worterskluwer.com Authorized User Name		
9. Signature.	bre 10/10/08	
Signature	Date	
Susan O'Brien	Total number of pages including cover	
Name of Person Signing	sheet, attachments, and document:	

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

RELEASE OF SECURITY AGREEMENT COVERING INTERESTS IN TRADEMARKS

Silicon Valley Bank ("Secured Party"), hereby releases its security interest in the interests of CERTICOM CORP ("Assignor") in the trademarked works set forth in that certain Intellectual Property And Security Agreement dated, March 22, 2002, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on May 31, 2002 Reel 2525 Frame 0635.

Date: October 7, 2008

SILICON VALLEY BANK

Name: Romil Randhawa
Title: Operations Manager

RECORDED: 10/10/2008

TRADEMARK REEL: 003869 FRAME: 0981