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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. Patent 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(les):	
Silicon Valley Bank 3003 Tasman Drive	Additional name(s) of conveying parties attached? ☐ Yes ☑ No	
Santa Clara, CA 95054	Name: ELEMENT LABS, INC.	
	Internal Address	
☐ Individual(s) ☐ Association		
☐ General Partnership ☐ Limited Partnership	Street Address: 2380 OWEN DRIVE	
77 6 1 - 6 - 4 -		
☑ Corporation-State		
☐ Other	City: SANTA CLARA	
Additional name(s) of conveying parties attached? ☐Yes ☒ No	State: CA	
3. Nature of conveyance/ Execution Date(s):	Country: USA	
3. Natura or conveyancer Execution Data(s):	Zip: 95054	
Execution Date(s): March 29, 2010	Association Citizenship General Partnership Citizenship	
☐ Assignment ☐Merger	Limited Partnership Citizenship	
Security Agreement	Corporation Citizenship : USA State: DE Other Citizenship If assignee is not domiciled in the United States, a domestic representative	
☑ Other: RELEASE	designation is attached: Yes X No (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)	8. Trademark Registration No.(s) 78369907 78913221	
	78013221	
C. Identification or Description of Trademark(s) (and Filing Date if Application or Additional sheets attached? ☐ Yes ☒ No Registration Number is unknown):		
5. Name and address of party to whom	6. Total number of applications and	
correspondence concerning document should be mailed:	registrations involved: 2	
Name: UCC Direct Services		
internal Address: Attn: 14080632	7. Total fee (37 CFR 2.6 (b)(6) & 3.41): \$ € ☐ Authorized to be charged by credit card ☐ Authorized to be charged to deposit account	
Street Address: 187 Wolf Road, Suite 101	Enclosed	
City: Albany State: NY ZIP: 12205	8. Payment Information:	
Phone Number: 1-800-342-3676 X 4065	a. Credit Card Last 4 Numbers 576 3	
Fax Number: 1-800-962-7049	Expiration Date /0 / / 1	
Email Address: cis-udsalbany@woltezekiuwer.com	b. Deposit Account Number Authorized User Name	
9. Signature 4/1//0		
Signature Date		
Name of Person Signing	Total number of pages including cover sheet, attachments, end 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
TRADEMARK

RELEASE OF SECURITY AGREEMENT COVERING INTERESTS IN TRADEMARKS

Silicon Valley Bank ("Secured Party"), hereby releases its security interest in the interests of Element Labs, Inc. ("Assignor") in the trademarked works set forth in that certain Intellectual Property Security Agreement dated, October 11, 2006, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on October 31, 2006 Reel 3418 Frame 0546.

Date: March 29, 2010

SILICON VALLEY BANK

Name: Romil Randhawa
Title: Operations Manager

RECORDED: 04/01/2010

TRADEMARK REEL: 004178 FRAME: 0234