

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	Merger/Change of Name (Effective 02/18/2011)		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Sonic Solutions		02/18/2011	CORPORATION: CALIFORNIA
RECEIVING PARTY DATA			
Name:	Sonic Solutions LLC		
Street Address:	7250 Redwood Boulevard, Suite 300		
City:	Novato		
State/Country:	CALIFORNIA		
Postal Code:	94945		
Entity Type:	LIMITED LIABILITY COMPANY: CALIFORNIA		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	2442271	AUTHORSRIPT	
Registration Number:	2938198	AUTHORSRIPT	
CORRESPONDENCE DATA			
Fax Number:	(206)359-9000		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	206-359-8000		
Email:	pctrademarks@perkinscoie.com		
Correspondent Name:	Grace Stanton, Perkins Coie LLP		
Address Line 1:	1201 Third Avenue, Suite 4800		
Address Line 4:	Seattle, WASHINGTON 98101		
ATTORNEY DOCKET NUMBER:	69374-4000.0003.US001-2		
NAME OF SUBMITTER:	Grace Han Stanton		
Signature:	/Grace Han Stanton/		
Date:	04/04/2011		
Total Attachments: 2 source=Sonic Solutions#page1.tif source=Sonic Solutions#page2.tif			

CH \$65.00 2442271



State of California Secretary of State

OBE MERG

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

FEB 18 2011

Certificate of Merger

(California Corporations Code sections
1113(g), 5019.1, 5019.1, 9840, 12540.1, 15911.14, 18915(b) and 17552)

IMPORTANT — Read all instructions before completing this form.

This Space For Filing Use Only

1. NAME OF SURVIVING ENTITY Sparta Acquisition Sub II LLC	2. TYPE OF ENTITY Limited Liability Company	3. CA SECRETARY OF STATE FILE NUMBER 201104010021	4. JURISDICTION California
5. NAME OF DISAPPEARING ENTITY Sonic Solutions	6. TYPE OF ENTITY Corporation	7. CA SECRETARY OF STATE FILE NUMBER C1525587	8. JURISDICTION California
9. THE PRINCIPAL TERMS OF THE AGREEMENT OF MERGER WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALLED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, SPECIFY THE CLASS AND THE NUMBER OF OUTSTANDING INTERESTS OF EACH CLASS ENTITLED TO VOTE ON THE MERGER AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS. ATTACH ADDITIONAL PAGES, IF NECESSARY.			
<u>SURVIVING ENTITY</u>		<u>DISAPPEARING ENTITY</u>	
<u>CLASS AND NUMBER</u> N/A	<u>AND</u> Vote of	<u>CLASS AND NUMBER</u> Common Stock - 100	<u>AND</u> Greater than 50%
1 member with 100% interest	sole member		
10. IF EQUITY SECURITIES OF A PARENT PARTY ARE TO BE ISSUED IN THE MERGER, CHECK THE APPLICABLE STATEMENT.			
<input checked="" type="checkbox"/> No vote of the shareholders of the parent party was required. <input type="checkbox"/> The required vote of the shareholders of the parent party was obtained.			
11. IF THE SURVIVING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, PROVIDE THE REQUISITE CHANGES (IF ANY) TO THE INFORMATION SET FORTH IN THE SURVIVING ENTITY'S ARTICLES OF ORGANIZATION, CERTIFICATE OF LIMITED PARTNERSHIP OR STATEMENT OF PARTNERSHIP AUTHORITY RESULTING FROM THE MERGER. ATTACH ADDITIONAL PAGES, IF NECESSARY. Change of name of Sparta Acquisition Sub II LLC to Sonic Solutions LLC			
12. IF A DISAPPEARING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, AND THE SURVIVING ENTITY IS NOT A DOMESTIC ENTITY OF THE SAME TYPE, ENTER THE PRINCIPAL ADDRESS OF THE SURVIVING ENTITY.			
PRINCIPAL ADDRESS OF SURVIVING ENTITY N/A		CITY AND STATE ZIP CODE	
13. OTHER INFORMATION REQUIRED TO BE STATED IN THE CERTIFICATE OF MERGER BY THE LAWS UNDER WHICH EACH CONSTITUENT OTHER BUSINESS ENTITY IS ORGANIZED. ATTACH ADDITIONAL PAGES, IF NECESSARY. N/A			
14. STATUTORY OR OTHER BASIS UNDER WHICH A FOREIGN OTHER BUSINESS ENTITY IS AUTHORIZED TO EFFECT THE MERGER. N/A		15. FUTURE EFFECTIVE DATE, IF ANY (Month) (Day) (Year)	
16. ADDITIONAL INFORMATION SET FORTH ON ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE PART OF THIS CERTIFICATE.			
17. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.			
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY <i>Alfred J. Amoroso</i>		DATE 2/18/11	
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON Alfred J. Amoroso, Manager			
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY <i>Stephen Yu</i>		DATE 2/18/11	
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON Stephen Yu, Manager			
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY <i>Alfred J. Amoroso</i>		DATE 2/18/11	
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON Alfred J. Amoroso, President and CEO			
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY <i>Stephen Yu</i>		DATE 2/18/11	
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON Stephen Yu, Secretary			
For an entity that is a business trust, real estate investment trust or an unincorporated association, set forth the provision of law or other basis for the authority of the person signing: _____			

10734010

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF EMPLOYMENT RELATIONS



I hereby certify that the foregoing
transcript of _____ is a
true and correct copy of the
original record in the custody of the
California Secretary of State's office.

FEB 18 2011

Date: _____

Debra Bowen
DEBRA BOWEN, Secretary of State