FORM PTO-1594	U.S. DEPARTMENT OF
COMMERCE	RM COVER SHEET United States Patent and Trademark Office
(Rev. 07/05) RECORDATION FOR OMB No. 0651-0027 (exp. 06/30/2008)	KW COAEK SHEET Outdet States Latent and Transmiss outde
TRADEMARKS ONLY To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.	
To the Director of the U.S. Patent and Trademark Office:	Please record the attached documents of the new address(es) below.
1. Name of conveying party(ies): Silicon Valley Bank 3003 Tasman Drive	2. Name and address of receiving party(les): Additional name(s) of conveying parties attached? ☐Yes ☒ No
Santa Clara, CA 95054	Name: Eragen Biosciences, Inc.
☐ Individual(s) ☐ Association	Internal Address:
	040 040 040 040
General Partnership Limited Partnership	Street Address: 918 Deming Way
Corporation-State: CA	
☐ Other	City: Madison State: WI
Additional name(s) of conveying parties attached? Tyes 🛭 No	Country: USA
3. Nature of conveyance/ Execution Date(s):	Zip: 53717
Execution Date(s): July 5, 2011	☐ Association Citizenship ☐ General Partnership Citizenship
☐ Assignment ☐ Merger	Limited Partnership Citizenship Corporation Citizenship : United States, Delaware
Security Agreement Change of Name	Other Citizenship If assignee is not domiciled in the United States, a domestic representative
ST Other Butters	designation is attached: Yes No (Designations must be a separate document from assignment)
Other: Release 4. Application number(s) or registration number(s) and identif	
A. Trademark Application No.(s)	B. Trademark Registration No.(s)
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Printed to the second s	2753833
C. Identification or Description of Trademark(s) (and Filing Date Registration Number is unknown):	te If Application or Additional sheets 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: 6
Name: UCC Direct Services	
internal Address: Attn: 14080632	7. Total fee (37 CFR 2.6 (b)(6) & 3.41): \$ 165.00 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 576 83
Fax Number: 1-800-962-7049	Expiration Date 10/12 b. Deposit Account Number
Email Address: cls-udsalbany@wolterskluwer.com	Authorized User Name
9. Signature.	7/6/11
Joseph D Borgman Total number of pages including cover	
Name of Person Signing.	sheet attachments and documents

RELEASE OF SECURITY AGREEMENT COVERING INTERESTS IN TRADEMARKS

Silicon Valley Bank ("Secured Party"), hereby releases its security interest in the interests of Eragen Biosciences, Inc. ("Assignor") in the trademarked works set forth in that certain Intellectual Property Security Agreement dated, 07/05/2007, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on 07/26/2007, Reel 3590, Frame 0314.

Dated: July 5, 2011

SILICON VALLEY BANK

Name: Mar

RECORDED: 07/06/2011

<u>Margaret Rujii</u>

Title:

By:

Operations Manager

TRADEMARK REEL: 004577 FRAME: 0777