FORM PTQ-1594		U.S. DEPARTMENT OF
(Rev. 07/05) OMB No. 0651-0027 (exp. 06/30/200	RECORDATION FO	PRM COVER SHEET United States Patent and Trademark Office
	TRADEMA	RKS ONLY
1. Name of conveying party(les):	Patent and Trademark Office:	: Please record the attached documents or the new address(es) below.
Silicon Valley Bank		2. Name and address of receiving party(jes):
3003 Tasman Drive		Additional name(s) of conveying parties attached? □Yes ☒ No
Santa Clara, CA 95054		Name: Calypto Design Systems, Inc.
		Internal Address;
☐ Individual(s)	Association	man part years out,
General Partnership	Limited Partnership	Street Address: 2933 Bunker Hill Lane Ste 202
☑ Corporation-State: CA		
☐ Other		City Coute Cl
		City: Santa Clara State: CA
Additional name(s) of conveying parties attached? ☐Yes ☒ No		Country; USA
3. Nature of conveyance/ Execution Date(s):		Zip: 95054
	` ,	
Execution Date(s): August 19, :	2011	Association Citizenship
☐ Assignment ☐	*4	General Partnership Citizenship
Assignment	Merger	LImited Partnership Citizenship
Security Agreement	Change of Name	Corporation Citizenship : United States, California
	Orlange of Name	Other Citizenship If assignee is not domiciled in the United States, a domestic representative
		designation is attached: Yes No
Other: Release	~~	(Designations must be a separate document from seciment)
Application number(s) or registr	ation number(s) and identifi	ication or description of the Trademark:
A. Trademark Application No.(s)		B. Trademark Registration No.(s)
		3651729
THE COLUMN		3493904
18 17 III	Yhou	3424206
		3407177
Identification or Description of Te Registration Number is unknown	n):	e if Application or Additional sheets attached? Yes No
5. Name and address of party	to whom	6. Total number of applications and
correspondence concerning document should be mailed:		registrations involved: 4
Something document should	ne maileo:	
Name: UCC Direct Services		
Internal Address: Attn: 1408063	. 2	7. Total fee (37 CFR 2.6 (b)(6) & 3.41): \$ //5-
With the second state of the second s		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 57683
Fax Number: 1-800-962-7049		Expiration Date /0/12
		Expiration Date 10/18
		b. Deposit Account Number
Email Address: cls-udsalbany@	wolterskluwer.com	Authorized User Name
9. Signature	5 12 m	8/23/11
	0	

Total number of pages including cover sheet, attachments, and document; Documents to be recorded (including cover sheet) should be faxed to (571) 273-014
7004700489 Assignment Recordation Services, Director of the USPTO, P.O. Box Rep. Alex D E: 0195

orgman

Signature

Name of Person Signing

9. Signature,

RELEASE OF SECURITY AGREEMENT COVERING INTERESTS IN TRADEMARKS

Silicon Valley Bank ("Secured Party"), hereby releases its security interest in the interests of Calypto Design Systems, Inc. ("Assignor") in the trademarked works set forth in that certain Intellectual Property Security Agreement dated, 10/31/2008, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on 11/03/2008, Reel 3881, Frame 0823.

Dated: August 19, 2011

SILICON VALLEY BANK

Name: Romii Randhawa
Title: Operations Manager

TRADEMARK REEL: 004611 FRAME: 0196

RECORDED: 08/24/2011