

FORM PTO-1594

COMMERCE

(Rev. 07/05)

OMB No. 0651-0027 (exp. 06/30/2008)

RECORDATION FORM COVER SHEET

United States Patent and Trademark Office

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):  
**Silicon Valley Bank**  
 3003 Tasman Drive  
 Santa Clara, CA 95054

Individual(s)                       Association  
 General Partnership               Limited Partnership  
 Corporation-State: CA  
 Other

Additional name(s) of conveying parties attached?  Yes  No

2. Name and address of receiving party(ies):  
 Additional name(s) of conveying parties attached?  Yes  No

Name: **Outstart, Inc.**  
 Internal Address:  
 Street Address: **745 Atlantic Avenue, 4<sup>th</sup> Floor**  
 City: **Boston**  
 State: **MA**  
 Country: **USA**  
 Zip: **02111**

Association Citizenship  
 General Partnership Citizenship  
 Limited Partnership Citizenship  
 Corporation Citizenship : United States, Delaware  
 Other Citizenship

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
 (Designations must be a separate document from assignment)

3. Nature of conveyance/ Execution Date(s):

Execution Date(s): **February 10, 2012**

Assignment                       Merger  
 Security Agreement               Change of Name

Other : **Release**

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)
	<b>2610120 2697280</b>
	<b>2495502 2680328</b>
	<b>2590823 2775616</b>
	<b>2570068</b>

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

Additional sheets attached?  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: **UCC Direct Services**  
 Internal Address: **Attn: 14080632**  
 Street Address: **187 Wolf Road, Suite 101**  
 City: **Albany** State: **NY** ZIP: **12205**  
 Phone Number: **1-800-342-3676 X 4065**  
 Fax Number: **1-800-962-7049**  
 Email Address: **cis-udsalbany@wolterskluwer.com**

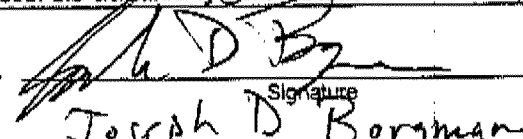
6. Total number of applications and registrations involved: **7**

7. Total fee (37 CFR 2.6 (b)(6) & 3.41): **\$ 190.00**  
 Authorized to be charged by credit card  
 Authorized to be charged to deposit account  
 Enclosed

8. Payment Information:

a. Credit Card Last 4 Numbers **1640**  
 Expiration Date **10/13**

b. Deposit Account Number  
 Authorized User Name

9. Signature:  2/10/12  
 Signature Date  
 Name of Person Signing

Total number of pages including cover 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

TRADEMARK

REEL: 004716 FRAME: 0790

OP \$190.00 2610120

**RELEASE OF SECURITY AGREEMENT COVERING  
INTERESTS IN TRADEMARKS**

**Silicon Valley Bank** ("Secured Party"), hereby releases its security interest in the interests of **Outstart, Inc.** ("Assignor") in the trademarked works set forth in that certain **Intellectual Property Security Agreement** dated, 11/18/2004, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on 12/10/2004, Reel 2990, Frame 0432.

Dated: **February 10, 2012**

SILICON VALLEY BANK

By:   
Name: Margaret Fujii  
Title: Agency Services Manager