

TRADEMARK ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	Conversion

CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
CDMdata, Inc.		12/31/2011	CORPORATION: MINNESOTA

RECEIVING PARTY DATA	
Name:	CDMdata, LLC
Street Address:	15333 N. Pima Road, Suite 370
City:	Scottsdale
State/Country:	ARIZONA
Postal Code:	85260
Entity Type:	LIMITED LIABILITY COMPANY: MINNESOTA

PROPERTY NUMBERS Total: 4		
Property Type	Number	Word Mark
Registration Number:	3251227	AUTOOFFICE
Registration Number:	2988162	AUTOOFFICE
Registration Number:	2881942	DIGITAL LOT
Registration Number:	3299939	DIGITALLOT

CORRESPONDENCE DATA	
Fax Number:	7147558290
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>	
Email:	ipdocket@lw.com
Correspondent Name:	Latham & Watkins LLP
Address Line 1:	650 Town Center Drive
Address Line 2:	Suite 2000
Address Line 4:	Costa Mesa, CALIFORNIA 92626

ATTORNEY DOCKET NUMBER:	039632-0029
NAME OF SUBMITTER:	Rhonda DeLeon

OP \$115.00 3251227

TRADEMARK

Signature:	/Rhonda DeLeon/
Date:	04/17/2012
Total Attachments: 3 source=CDMdata Inc conversion to CDMdata LLC (12-31-11)#page1.tif source=CDMdata Inc conversion to CDMdata LLC (12-31-11)#page2.tif source=CDMdata Inc conversion to CDMdata LLC (12-31-11)#page3.tif	



STATE OF MINNESOTA
SECRETARY OF STATE
ARTICLES AND PLAN OF CONVERSION
Minnesota Corporations & Limited Liability Companies
Minnesota Statutes, Chapter's 302A & 322B
Fee \$35.00

Read the instructions before completing this form.

1. Name of the Organization before the Conversion is: (Required)

CDMdata, Inc.

2. Name of the Organization after the Conversion shall be: (Required)

CDMdata, LLC

3. After the Conversion, the Organization shall be a: (Required) (Check one of the following filing types.)

Corporation

Limited Liability Company

4. The Terms and Conditions of the Proposed Conversion are: (Required)

None

5. The manner and basis of converting each ownership interest in the organization immediately before the conversion into ownership interests of the organization immediately after the conversion, in whole or in part, into money or other property is: (Required)

Each share in the corporation is converted to a membership unit in the limited liability company.

6. Include a Copy of the Proposed Articles of Incorporation or Articles of Organization of the Organization after the Conversion, with the Articles and Plan of Conversion. (Required)

7. I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

Authorized Signature of Individual on Behalf of the Converting Company or Authorized Agent (Required)

CHARLES N. BOWEN, ASSISTANT SECRETARY

8. Name, daytime telephone number and e-mail address of contact person:

Name JOAN Como

Phone Number 678-646-0836

E-Mail Address joan.como@coxinc.com

Attachment A

CDMData, Inc. - Conversion to CDMData, LLC*

*Effective Date: The effective date of the conversion will be 12/31/2011.



MINNESOTA SECRETARY OF STATE
 ARTICLES OF ORGANIZATION FOR
 A LIMITED LIABILITY COMPANY
 MINNESOTA STATUTES CHAPTER 322B

Filing Fee: \$160.00

READ THE INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. Name of Company: CDMdata, LLC

(The Company name must include the words Limited Liability Company or the abbreviation LLC)

2. Registered Office Address: (A PO Box by itself is not acceptable)

380 Jackson Street, Suite 700
 Complete Street Address or Rural Route and Rural Route Box Number City MN 55101
 State Zip Code

3. Name of Registered Agent (optional): Corporation Service Company

4. Business Mailing Address: (if different from registered office address)

6205 Peachtree Dunwoody Road, Atlanta GA 30328
 Address City State Zip Code

5. Desired Duration of LLC: (in years) (If you do not complete this item, a perpetual duration is assumed by law.)

6. Does this LLC own, lease or have any interest in agricultural land or land capable of being farmed?
 (Check One) Yes No

7. Organizers

I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

Organizer's Name: (print)

Complete Address :

Signature:

Charles N. Bowen, Assistant Secretary	6205 Peachtree Dunwoody Rd.	
	Atlanta, GA 30328	

8. List a name, daytime phone number, and e-mail address of a person who can be contacted about this form.

Joan Como

678-645-0835

joan.como@coxinc.com

Contact Name

Daytime Phone Number Email Address

STATE OF MINNESOTA
 DEPARTMENT OF STATE

FILED

DEC 13 2011

Secretary of State

TRADEMARK