FORM PTO-1594	U.S. DEPARTMENT OF
COMMERCE	M COVER SHEET United States Patent and Trademark Office
(Rev. 07/05) RECORDATION FORM COVER SHEET United States Patent and Trademark Office OMB No. 0651-0027 (exp. 06/30/2008)	
TRADEMARKS ONLY	
To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.	
Name of conveying party(ies): Silicon Valley Bank 3003 Tesman Drive	2. Name and address of receiving party(les): Additional name(s) of conveying parties attached? □Yes ☒ No
Santa Clara, CA 95054	Name: Sonim Technologies, Inc.
	Internal Address:
☐ Individual(\$) ☐ Association	
☐ General Partnership ☐ Limited Partnership	Street Address: 1825 S. Grant Street, Suite 200
☑ Corporation-State: CA	
☐ Other	City: San Mateo State: CA
Additional name(s) of conveying parties attached? ☐Yes ☒ No	Country: USA
3. Nature of conveyance/ Execution Date(s):	Zip: 94402
 Execution Date(s): 11/06/2015	Association Citizenship
	General Partnership Citizenship
Assignment Merger	☐ Limited Partnership Citizenship ☐ Corporation Citizenship : United States, DE
Security Agreement	Other Citizenship If assignee is not domiciled in the United States, a domestic representative
⊠ Other : Release	designation is attached: Yes No (Designations must be a separate document from assignment)
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)
A CONTRACTOR OF THE CONTRACTOR	2882298 3690068
THE BEAUTIES A TELL THE	2948711 3262357
La pers uniqui per pers	3502861
	3496914
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	6. Total number of applications and
correspondence concerning document should be mailed:	registrations involved: 6
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Name: UCC Direct Services	7. Total fee (37 CFR 2.6 (b)(6) & 3.41): \$155.00
Internal Address: Attn: 14080632	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 @ 97 4
Four Numbers 4, 990, 000, 7040	Expiration Date (6-1)
Fax Number: 1-800-962-7049	

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Email Address: cls-udsalbany@wolterskluwer.com	b. Deposit Account Number Authorized User Name
9. Signature. Signature	1/- 16-15 Date
Joseph D. Borgman 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

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RELEASE OF SECURITY AGREEMENT COVERING INTERESTS IN TRADEMARKS

Silicon Valley Bank ("Secured Party"), hereby releases its security interest in the interests of Sonim Technologies, Inc. ("Assignor") in the trademarked works set forth in that certain Intellectual Property Security Agreement dated, 10/09/2013, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on 10/09/2013, Reel 5128, Frame 0496.

Dated: 11/06/2015

SILICON VALLEY BANK

Name: Mike Jordan

Bv:

RECORDED: 11/16/2015

Title: Senior Operations Manager

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