



5-18-01

TO THE ASSISTANT COMMISSIONER OF PA.

101720585

Attached original documents or copy thereof.

1. Name of conveying party(ies): (If multiple assignors, list numerically)

SILICON FILM TECHNOLOGIES

- Individual
- Association
- General Partnership
- Limited Partnership
- Corporation - State
- Other:

Additional name(s) of conveying party(ies) attached?

Yes  No

2. Name and address of receiving party(ies):

**Name:** KNOBBE, MARTENS, OLSON & BEAR, LLP  
**Internal Address:** Sixteenth Floor  
**Street Address:** 620 Newport Center Drive  
**City:** Newport Beach **State:** CA **ZIP:** 92660

- Individual
- Association
- General Partnership
- Limited Partnership
- Corporation - State
- Other:

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)

Additional name(s) and address(es) attached?

Yes  No

3. Nature of conveyance:

- Assignment
- Merger
- Security Agreement
- Change of Name
- Other: Security Interest

Execution Date: (If multiple assignors, list execution dates in numerical order corresponding to numbers indicated in 1 above) April 16, 2001

4. Application number(s) or registration number(s):

- a. Trademark Application No(s):
- b. Trademark Registration No(s):

Additional numbers attached?  Yes  No

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

**Name:** Gordon H. Olson  
 KNOBBE, MARTENS, OLSON & BEAR, LLP  
**Customer No.** 20,995  
**Internal Address:** Sixteenth Floor  
**Street Address:** 620 Newport Center Drive  
**City:** Newport Beach **State:** CA **ZIP:** 92660  
**Attorney's Docket No.:**

7. Total fee (37 CFR 3.41): \$215.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number: 11-1410

Please charge this account for any additional fees which may be required, or credit any overpayment to this account.

6. Total number of applications and registrations involved: 8

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct, and any attached copy is a true copy of the original document.

Gordon H. Olson  
Name of Person Signing

Signature

5/15/01  
Date

RECEIVED  
 2:51 MAY 18 PM '01  
 ASSIGNMENT SERVICES  
 DIVISION

Total number of pages including cover sheet, attachments and document: 3

Mail documents to be recorded with required cover sheet information to:

05/21/2001 BT0N11 00000007 75634274  
 01 FC:481 40.00 DP  
 02 FC:482 175.00 DP

U.S. Patent and Trademark Office  
 Attn: Assignment Division  
 Crystal Gateway-4  
 1213 Jefferson Davis Highway, Suite 320  
 Arlington, VA 22202

**TRADEMARK**  
**REEL: 002297 FRAME: 0604**

<b>CASE NUMBER</b>	<b>APPLICATION NUMBER</b>	<b>FILING DATE</b>	<b>REGISTRATION NUMBER</b>	<b>REGISTRATION DATE</b>
SFILM.005T	75/634,274	2/4/99		
SFILM.026T	75/828,694	10/22/99		
SFILM.027T	75/828,693	10/22/99		
SFILM.028T	75/828,690	10/22/99		
SFILM.045T	75/759,654	7/26/99		
SFILM.046T	75/759,655	7/26/99		
SFILM.047T	75/760,902	7/26/99		
SFILM.057T	76/011,726	3/27/00		

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**FINANCING STATEMENT** — FOLLOW INSTRUCTIONS CAREFULLY

This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional) <i>Danielle Walsh</i>	B. FILING OFFICE ACCT. # (optional)
C. RETURN COPY TO: (Name and Mailing Address)  <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p><i>Knobbe, Martens, Olson &amp; Bear LLP</i>  <i>Attn: Danielle Walsh</i>  <i>620 Newport Center Drive, 16th Floor</i>  <i>Newport Beach, CA 92660</i></p> </div>	
D. OPTIONAL DESIGNATION (if applicable): <input type="checkbox"/> LESSOR/LESSEE <input type="checkbox"/> CONSIGNOR/CONSIGNEE <input type="checkbox"/> NON-UCC FILING	

**FILED**  
**SACRAMENTO, CA**  
**APR 16, 2001 AT 0800**  
**BILL JONES**  
**SECRETARY OF STATE**

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b)

1a. ENTITY'S NAME <i>Silicon File Technologies</i>			
OR	1b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS <i>16265 Laguna Canyon Road</i>		CITY <i>Irvine</i>	STATE COUNTRY POSTAL CODE <i>CA USA 92618</i>
1d. S.S. OR TAX I.D.#	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	1e. TYPE OF ENTITY	1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION
			1g. ENTITY'S ORGANIZATIONAL I.D.#, if any <input type="checkbox"/> NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b)

2a. ENTITY'S NAME			
OR	2b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE COUNTRY POSTAL CODE
2d. S.S. OR TAX I.D.#	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	2e. TYPE OF ENTITY	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION
			2g. ENTITY'S ORGANIZATIONAL I.D.#, if any <input type="checkbox"/> NONE

3. SECURED PARTY'S (ORIGINAL S/P or ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME - insert only one secured party name (3a or 3b)

3a. ENTITY'S NAME			
OR	3b. INDIVIDUAL'S LAST NAME		
	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS <i>620 Newport Center Dr., 16th Floor Newport Beach</i>		CITY	STATE COUNTRY POSTAL CODE <i>CA USA 92660</i>

4. This FINANCING STATEMENT covers the following types or items of property:

*See Exhibit "A"*

5. CHECK <input checked="" type="checkbox"/> This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or (b) in accordance with other statutory provisions [additional data may be required]	7. If filed in Florida (check one) <input type="checkbox"/> Documentary stamp tax paid <input type="checkbox"/> Documentary stamp tax not applicable
6. REQUIRED SIGNATURE(S) <i>Danielle Walsh attorney-in-fact</i>	8. <input type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Attach Addendum [if applicable]
	9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) (ADDITIONAL FEE) (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2