U.S. DEPARTMENT OF COMMERCE nited States Patent and Trademark Office

OMB Collection 0651-0027 (exp. 6/30/2005



102869008 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)/Execution Date(s): 2. Name and address of receiving party(ies) ☐ Yes Pinpoint Networks, Inc. Additional names, addresses, or citizenship attached? X No Name: Power By Hand, Inc. Internal Individual(s) ☐ Association Address: Limited Partnership General Partnership Street Address: 2800 Meridian Parkway, Ste. X Corporation-State Delaware Durham City: Other State: North Carolina Citizenship (see guidelines) USA ____Zip:_ 27713 Country: Execution Date(s) April 30, 2004 Association Citizenship General Partnership Citizenship ___ Additional names of conveying parties attached? Yes 🕱 No Limited Partnership Citizenship 3. Nature of conveyance: Corporation Citizenship Delaware Assignment X Merger Citizenship Security Agreement Change of Name 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) 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) 78/212,398 and 78/212,400 Additional sheet(s) attached? Yes X No C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown): 5. Name & address of party to whom correspondence 6. Total number of applications and concerning document should be mailed: registrations involved: Christopher A. Sloan, Esq. Internal Address: Suite 1600 7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$_ Boult, Cummings, Conners & Berry, PLC Authorized to be charged by credit card Street Address: 414 Union Street Authorized to be charged to deposit account ☐ Enclosed City: Nashville 8. Payment Information: TN37219 a. Credit Card State: Zip: Last 4 Numbers Expiration Date Phone Number: 615-252-2392 Fax Number: 615-252-6392 b. Deposit Account Number Authorized User Name Email Address: Csboan@boultcummings.com 9. Signature: October 14, Signature Date Christopher A. Sloan, Attorney Total number of pages including cover sheet, attachments, and document: Name of Person Signing Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF MERGER, WHICH MERGES:

"PINPOINT NETWORKS, INC.", A DELAWARE CORPORATION,

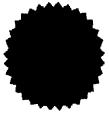
WITH AND INTO "FOMER BY HAND, INC." UNDER THE NAME OF "FOWER BY HAND, INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE THE THIRTTETH DAY OF APRIL, A.D. 2004, AT 3:23 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF MERGER IS THE THIRTIETH DAY OF APRIL, A.D. 2004, AT 11:59 O'CLOCK F.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

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RECORDED: 10/19/2004



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3084700

DATE: 04-30-04

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