



# ORDINATION FORM COVER SHEET PATENTS ONLY

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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies) Millitech Corporation</p> <p style="text-align: center; font-size: 2em;">4-17-01</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies)</p> <p>Name: <u>Telaxis Communications Corporation</u></p> <p>Internal Address: _____</p> <p style="text-align: center;">APR 17 2001</p> <p>Street Address: <u>20 Industrial Park East</u></p> <p>City: <u>South Deerfield</u> State: <u>MA</u> ZIP: <u>01373</u></p> <p>Additional name(s) &amp; address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Merger</p> <p><input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name</p> <p><input type="checkbox"/> Other _____</p> <p>Execution Date: <u>October 14, 1999</u></p>	

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

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

<p>A. Patent Application No.(s) <u>09/346,425</u></p>	<p>B. Patent No.(s) <u>40E</u></p>
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Additional numbers attached?  Yes  No

<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>David J. Thibodeau, Jr.</u></p> <p>Internal Address: _____</p> <p><u>Hamilton, Brook, Smith &amp; Reynolds, P.C.</u></p> <p>Street Address: <u>Two Militia Drive</u></p> <p>City: <u>Lexington</u> State: <u>MA</u> ZIP: <u>02421-4799</u></p>	<p>6. Total number of applications and patents involved: <input checked="" type="checkbox"/> 1</p> <p>7. Total Fee (37 C.F.R. 3.41)..... \$ <u>40.00</u></p> <p><input checked="" type="checkbox"/> Enclosed</p> <p><input checked="" type="checkbox"/> Authorized to charge any deficiencies or credit any overpayment to deposit account</p> <p><input type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit account number: <u>08-0380</u></p> <p>(Attach duplicate copy of this page if paying by deposit account)</p>
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**DO NOT USE THIS SPACE**

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.*

David J. Thibodeau, Jr.            10 April 2001

Name of Person Signing      Signature      Date

Total number of pages including cover sheet, attachments, and document:  2



*The Commonwealth of Massachusetts*

*Secretary of the Commonwealth*

*State House, Boston, Massachusetts 02133*

**William Francis Galvin**  
Secretary of the  
Commonwealth

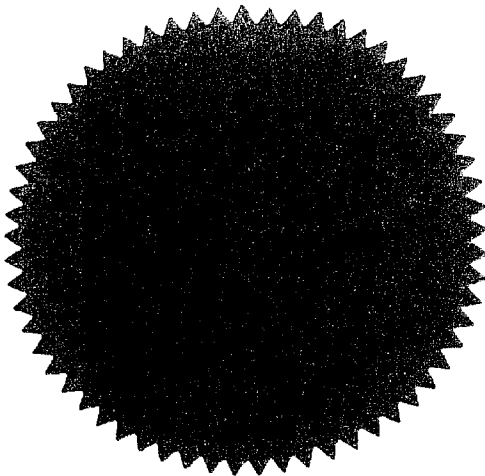
June 2, 2000

TO WHOM IT MAY CONCERN:

I hereby certify that according to records in this office, **MILLITECH CORPORATION** was incorporated under the General Laws of this Commonwealth on **January 6, 1982**.

I also certify that by Articles of Amendment filed here, **October 14, 1999** the name of said corporation was changed to **TELAXIS COMMUNICATIONS CORPORATION**.

I also certify that so far as appears of record here, said corporation still has a legal existence.



In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth



RECORDED: 04/17/2001

PATENT  
REEL: 011729 FRAME: 0504