CORR

Form PTO-1595 (Rev. 6-93) OMB No. 0651-0011 (exp. 4/94) 08-27-2001

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

| To the Honorable Commissioner of P 101823 | attached original documents or copy thereof |
|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
| 1. Name of conveying party(ies): | 2. Name and Address of receiving party(ies) |
| Christof Faller | Name: Agere Systems Inc. |
| 1.5[' | Internal Address: |
| Additional name(s) of conveying party(ies) attached? [] Yes [X] No | |
| 3. Nature of conveyance: | |
| [X] Assignment [] Merger | Street Address: |
| [] Security Agreement [] Change of Name | 555 Union Boulevard |
| [] Other | City: Allentown State: PA ZIP: 18109 |
| | Additional name(s) & address(es)attached? |
| Execution Date: 05/02/01 | [] Yes [X] No |
| 4. Application number(s) or patent number(s): | |
| If this document is being filed together with a ne application is: | w application, the execution date of the |
| A. Patent Application No.(s) | B. Patent No.(s) |
| 09/848,877 | l |
| Additional numbers attach | ned? [] Yes [X] No |
| 5. Name and address of party to whom correspondence concerning document should be mailed: | 6. Total number of applications and patents |
| concerning document bhould be mailed. | involved:[1] |
| Name: Steve Mendelsohn | 7. Total Fee (37 CFR 3.41)\$\\$\frac{40.00}{}\$ |
| Internal Address: MENDELSOHN & ASSOCIATES, P.C. | [] Enclosed |
| | [X] Authorized to be charged to deposit account. |
| Street Address: 1515 Market Street | 8. Deposit account number: |
| Suite 715 | 50-0782 |
| | (attach duplicate copy of this page if |
| City: Philadelphia State: PA ZIP: 19102 DO NOT USE T | paying by deposit account) |
| DO NOT 058 1 | III DEACE |
| 9. Statement and signature. To the best of my knowledge and belief, the foregattached copy is a true copy of the original document | going information is true and correct and any |
| Steve Mendelsohn Name of Person Signing | Mendesh, 8/8/01 Signature Date |
| Total number of pages including cover sheet, a | ttachments, and document:3 |
| Mail documents to be recorded with re 992.1007 Commissioner of Patents & Tr Faller 5 Washington, I | ademarks, Box Assignments |

Send All Correspondence to Customer No.: 22186

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

To the Honorable Commissioner of Pate.

101716540

thed original documents or copy thereof.

REEL: 012094 FRAME: 0065

| 1011 | 100-TO Shed of Ightar documents of copy thereof. |
|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 1. Name of conveying party(ies): | 2. Name and Address of receiving party(ies) Name: Agere Systems Inc. |
| Additional name(s) of conveying party(ies) attached? [] Yes [X] No | Internal Address: 588 |
| 3. Nature of conveyance: | Street Address: |
| [X] Assignment [] Merger | 555 Union Boulevard |
| [] Security Agreement [] Change of Name | City: Allentown State: FL Zip: 18109 |
| [] Other | Additional name(s) & address(es) attached? |
| Execution Date: 05/02/01 | [] Yes [X] No |
| 4. Application number(s) or patent number(s): | |
| If this document is being filed together with a new is: $05/02/01$. | application, the execution date of the application |
| A. Patent Application No.(s) | B. Patent No.(s) |
| Additional numbers atta | ached? [] Yes [X] No |
| 5. Name and address of party to whom correspondence concerning document should be mailed: | 6. Total number of applications and patents involved: [1] |
| Name: Steve Mendelsohn | 7. Total Fee (37 CFR 3.41)\$40.00 |
| Internal Address: Mendelsohn & Associates, P.C. | [] Enclosed |
| | [X] Authorized to be charged to deposit account |
| Street Address: 1515 Market Street | 8. Deposit account number: |
| Suite 715 | 50-1735 (attach duplicate copy of this page if paying |
| City: Philadelphia State: PA VIP: 19102 | by deposit account) |
| DO NOT USE | THIS SPACE |
| copy is a true copy of the original document. Steve Mendelsohn | ing information is true and correct and any attached Nendellan |
| Name of Person Signing S | ignature Date |
| Total number of pages including cover sheet, at | |
| 992.1007 Commissioner of Patents & | required cover sheet information to: Trademarks, Box Assignments , D.C. 20231 |
| Send All Correspondence to Customer No.: 22186 | PATENT |

ASSIGNMENT AND AGREEMENT

For value received, I, Christof Faller of Murray Hill in the County of Union and State of New Jersey, hereby sell, assign and transfer to Agere Systems Inc., a corporation of the State of Delaware, having an office at 555 Union Boulevard. Allentown, PA 18109, U.S.A., and its successors, assigns and legal representatives, the entire right, title and interest, for the United States of America, in and to certain inventions related to Perceptual Synthesis of Auditory Scenes described in an application for Letters Patent of the United States, executed by us of even date herewith, and all the rights and privileges in said application and under any and all Letters Patent that may be granted in the United States for said inventions; and we also concurrently hereby sell, assign and transfer to Agere Systems Inc. the entire right, title and interest in and to said inventions for all countries foreign to the United States, including all rights of priority arising from the application aforesaid, and all the rights and privileges under any and all forms of protection, including Letters Patent, that may be granted in said countries foreign to the United States for said inventions.

We authorize Agere Systems Inc. to make application for such protection in its own name and maintain such protection in any and all countries foreign to the United States, and to invoke and claim for any application for patent or other form of protection for said inventions, without further authorization from us, any and all benefits, including the right of priority provided by any and all treaties, conventions, or agreements.

We hereby consent that a copy of this assignment shall be deemed a full legal and formal equivalent of any document which may be required in any country in proof of the right of Agere Systems Inc. to apply for patent or other form of protection for said inventions and to claim the aforesaid benefit of the right of priority.

We request that any and all patents for said inventions be issued to Agere Systems Inc. in the United States and in all countries foreign to the United States, or to such nominees as Agere Systems Inc. may designate.

992.1007

PATENT REEL: 012094 FRAME: 0066 We agree that, when requested, we shall, without charge to Agere Systems Inc. but at its expense, sign all papers, and do all acts which may be necessary, desirable or convenient in connection with said applications, patents, or other forms of protection.

Christof Faller

Date: 05-02-01

United States of America

State of New Jersey) ss County County Onion)

On this _______ day of _______, 20_0 1___, before me personally came *Christof Faller*, to me known to be the individual described in and who executed the foregoing instrument, and acknowledged execution of the same.

Notary Public

ANGELINA CAGLIOSTRO
A NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 1/21/2004

Agere Systems Inc. 555 Union Boulevard Allentown, Pennsylvania 18109

RECORDED: 08/13/2001

992.1007

PATENT REEL: 012094 FRAME: 0067

JJZ. 1001