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	pe 5-6-0	Assignment	Security	Agreement	
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Name (line 1) Sau	u Ching Wong			Month Day Year 5 5 2002	
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Name (line 2)					
Second Party				Execution Date Month Day Year	
Name (line 1)					
Name (line 2)					ĺ
Receiving Party Name (line 1) Mu	Iti Level Memory Tec		additional names o	f receiving parties attached	
	III Level Memory 100			If document to be recorded is an assignment and the	
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Address (line 1) 96() Saratoga Avenue, S	Suite 115		representative is attached. (Designation must be a	
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				95129	
Address (line 3) Sal	n Jose	CA State/Coun		Zip Code	
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time for reviewing the upcu	 Office, Chief Information C Paperwork Reduction Proje demark Assignment Practic 	Officer, Washington, D.C. 202 act (0651-0027), Washington, ce. DO NOT SEND REQUES	D.C. 20503. See OME TS TO RECORD ASS	per Cover Sheet to be recorded, inclu- tents regarding this burden estimate to Information and Regulatory Affairs, Of Information Collection Budget Packag IGNMENT DOCUMENTS TO THIS Information to: hington, D.C. 20231	aing the ffice of ge

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Corresponde Address	nt Name and Area Code and Telephone Number	(408) 927-6700						
Name	David Millers							
Address (line 1)	Patent Law Offices of David Millers							
Address (line 2)	6560 Ashfield Court							
Address (line 3)	San Jose, CA 95120							
Address (line 4)								
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If this document is being signed by the first name	filed together with a <u>new</u> Patent Application, enter the date the patent application dexecuting inventor.	ion was Month Day Year 5 5 2002						
Enter PC <u>only if</u> a Number	Paration Treaty (PCT) T application number PCT U.S. Application as not been assigned. PCT	PCT						
Number of P		# 1						
Fee Amount	Fee Amount for Properties Listed (37 CFR 3.41):	\$ 40.00						
Method of I Deposit Ac Enter for pay		# 50-1767						
	Authorization to charge additional fees:	Yes 🛛 No 🗋						
Statement al To the bes attached c indicated	t of my knowledge and belief, the foregoing information to depart opy is a true copy of the original document. Charges to deposit herein.							
David T. Millers	(Reg. No. 37,396) Darra Miller	6-May-02 Date						
Name of Sign	Person	Dato						

MLM007US

PATENT REEL: 012881 FRAME: 0455 Attorney Docket No.: MLM007US

ASSIGNMENT

For good and valuable consideration, receipt of which is hereby acknowledged, I,

Sau Ching Wong of 30 Sugar Hill Drive, Hillsborough, California 94010,

hereby sell, assign, and transfer to

<u>Multi Level Memory Technology</u>, a corporation of California, having a place of business at 960 Saratoga Avenue, Suite 115, San Jose, CA 95129, hereinafter ASSIGNEE,

the entire right, title, and interest throughout the world in: my invention(s) described in

BI-DIRECTIONAL FLOATING GATE NONVOLATILE MEMORY

for which I executed United States patent application on or about the date of this assignment; all patent applications and patents of every country for said invention(s), including divisions, reissues, continuations, and extensions thereof; and all rights of priority resulting from the filing of said patent applications. I authorize ASSIGNEE to apply for patents of any countries for said invention(s) and to claim all rights of priority without further authorization from me. I agree to execute all papers useful in connection with said patent applications, and generally to aid ASSIGNEE and its successors, assigns, and nominees, at their request and expense, in obtaining and enforcing patents for said invention(s) in any and all countries; and I authorize and request that the United States Patent and Trademark Office and any other authority having the duty or power to issue patents in any country issue all patents granted for said invention(s) to the ASSIGNEE, its successors and assigns.

Executed this 5 d	ay of	May	, 2002	2.
		Sa	- Ching -	Wag_
			Sau Ching W	long
State of <u>California</u>	-			
County of	-			
On	before me,	personally know	vn to me or provec	personally appeared i to me on the basis of
satisfactory evidence to be the pers	on(s) whose nar	ne(s) is(are) subscribe	ed to the within in	strument and v(ies), and that by

satisfactory evidence to be the person(s) whose name(b) include / her/their authorized capacity(ies), and that by acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, his/her/their signature(s) acted.

WITNESS my hand and official seal.

SIGNATURE OF NOTARY