

02-07-2003

FORM PTO-1619A
Expires 06/30/99
OMB 0651-0027



U.S. Department of Commerce
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PATENT

102360252
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TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

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- ☒ New
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Conveyance Type

☐ Assignment ☐ Security Agreement

☐ License ☒ Change of Name

☐ Merger ☐ Other

U.S. Government

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☐ Departmental File

☐ Secret File

Conveying Party(ies)

☐ Mark if additional names of conveying parties attached

Name (line 1) Bell Communications Research, Inc.

Execution Date
Month Day Year
5 7 99

Name (line 2)

Second Party

Name (line 1)

Execution Date
Month Day Year

Name (line 2)

Receiving Party

☐ Mark if additional names of receiving parties attached

Name (line 1) Telcordia Technologies, Inc.

Name (line 2)

Address (line 1) 445 South Street

Address (line 2)

Address (line 3) Morristown

NJ

07960-6438

City

State/Country

Zip Code

☐ If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

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Mail documents to be recorded with required cover sheet(s) information to:
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20/535361.1

PATENT
REEL: 013718 FRAME: 0852

Correspondent Name and Address

Area Code and Telephone Number

617-832-1000

Name Kevin A. Oliver

Address (line 1) Foley Hoag LLP

Address (line 2) 155 Seaport Blvd.

Address (line 3) Boston, MA 02210

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments

1

Application Number(s) or Patent Number(s)

☐ Mark if additional numbers attached.

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

Patent Application Number(s)

Patent Number(s)

<u>5,677,955</u>		

If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing inventor.

Month Day Year

Patent Cooperation Treaty (PCT)

Enter PCT application number only if a U.S. Application Number as not been assigned.

PCT		PCT		PCT	
PCT		PCT		PCT	

Number of Properties

Enter the total number of properties involved.

1

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$ 40.00

Method of Payment:

Enclosed ☒

Deposit Account ☐

Deposit Account

Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

06-1448

Authorization to charge additional fees:

Yes ☒

No ☐

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. Charges to deposit account are authorized, as indicated herein.

Kevin A. Oliver, Reg. No. 42,049

Name of Person Signing

Kevin A. Oliver
Signature

January 29, 2003
Date



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

August 21, 2001

To Whom It May Concern:

I certify that according to the records of this office,

CENTRAL SERVICES ORGANIZATION, INC.

a corporation organized under the laws of **Delaware** on **October 20, 1983** was qualified to do business in the Commonwealth of Massachusetts on **January 30, 1984**, pursuant to General Laws Chapter 181, § 4.

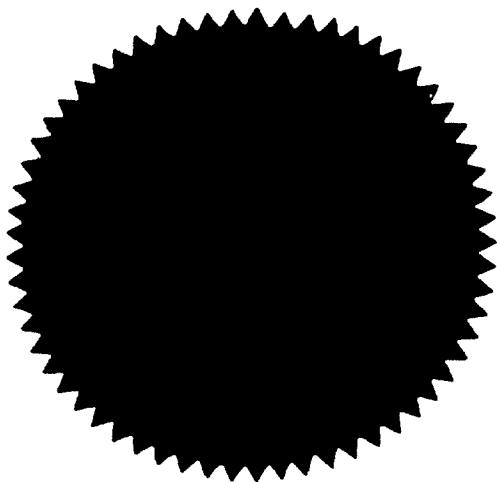
I further certify that on **March 23, 1984**, an Amended Foreign Corporation Certificate was filed reflecting the change of name of said corporation to

BELL COMMUNICATIONS RESEARCH, INC.

I also certify that on **May 7, 1999**, an Amended Foreign Corporation Certificate was filed reflecting the change of name of said corporation to

TELCORDIA TECHNOLOGIES, INC.

I further certify that said corporation is still qualified to do business in the Commonwealth.



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

