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Tab acturings	ademarks: Please record the attached original documents or copy thereof.
1. Name of conveying party(ies): SHAU,JENG-JYE	2. Name and address of receiving party(ies)  Name: UniRAM Technology, Inc.  Internal Address:
Additional name(s) of conveying party(es) attached? 🚉 Ye	s 📑 No
3. Nature of conveyance:	
Assignment	
	Street Address: 3375 Scott Blud.
T033	suite 336
□: Other	city: Santa Clara CA Zip: 95054
Execution Date: 03/15/2004	Additional name(s) & address(es) attached? 🖳 Yes 🥨 No
4. Application number(s) or patent number(s):	
If this document is being filed together with a A. Patent Application No.(s)	B. Patent No.(s)  B. Patent No.(s)  6,108,229 6,216,246 6,606,275 numbers attached?  Yes V No 6,608,780
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<ol><li>Name and address of party to whom correspondence on concerning document should be mailed:</li></ol>	
Name: SHAU, JENG-JYE	7. Total fee (37 CFR 3.41)
Internal Address:	Enclosed  Authorized to be charged to deposit account
Street Address: 991 Amarillo	8. Deposit account number:
city: Palo Alto State: CA Zip: 9	(Attach duplicate copy of this page if paying by deposit account)
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PATENT REEL: 014428 FRAME: 0233

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Note: Signatures of all th	e inventors or assignee is required, See below*	, or record or .	and driand sites out or a lost raps	. ,

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forms are submitted.

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	Sample Form (former PTO/98/16) (08-03)
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	Sample Form (former PTC/9B/15) (08-03)
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ASSIGNMENT OF APPLICATION	ALTE OF DI
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"assignee" whose mailing address is 33.75 Scott 131vd,书	336 Santa Clara, 18 CA 95054
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**RECORDED: 03/15/2004** 

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