PF 030096

FORM PTO-1595 9-21-95

U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office

RECORDATION FORM COVER SHEET PATENTS ONLY

	To the Honorable Assistant Commissioner for Patents: Please record the attached ong	inal documents or copy thereof.
Additional name(s) of conveyance: Yes No X 3. Nature of conveyance: Classe of Name Classe of Name 3. Nature of conveyance: Classe of Name Classe of Name 3. Nature of conveyance: Classe of Name Classe of Name Classe of Name June 28, 2004, respectively Yes No X A Application Date: June 28, 2004, respectively Yes No X A Profile of No (s) B. Patent No (s) B. Patent No (s) Filed July 2, 2004 Series 6. Total number(s) or patent number(s) Additional numbers attached? Yes No X 4. Street Address: 2 Independence Way 6. Total number of applications and patents involved1 City: PRINCETON State: NEW JERSEY Zip -06543-5312 OF NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and bellef, the foregoing information is true and correct and any attached copy is a true copy of the origenet document. Order No. 0691-0011 (exp. 4:04) DO NOT DETACH THUS PORTION Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to:	I. Name of conveying party(ies): Xavier DUCLOUX Patrice ALEXANDRE	2. Name and address of receiving party(ies):
Converging partylies) Street Address: 46, Quei A. Le Galle F-92100 Boulogue -Billancourt, France City: State: Street Address: 46, Quei A. Le Galle F-92100 Boulogue -Billancourt, France City: State: Street Address: 46, Quei A. Le Galle F-92100 Boulogue -Billancourt, France City: State: Street Address: 46, Quei A. Le Galle F-92100 Boulogue -Billancourt, France City: State: Street Address: 46, Quei A. Le Galle F-92100 Boulogue -Billancourt, France City: State: Street Address: 46, Quei A. Le Galle F-92100 Boulogue -Billancourt, France City: State: Street Address: 46, Quei A. Le Galle F-92100 Boulogue -Billancourt, France City: State: Street Address: 46, Quei A. Le Galle F-92100 Boulogue -Billancourt, France City: No X Additional number(3) Filed July 2, 2004 Serial No. 10/884,158 Additional numbers statched7 Yes No X Street Address: 2 Independence Way City: FRINCETON Shee: NEW JERSEY Zip: 08543-5312 DO NOT USE THIS SPACE Street Address of pages including cover sheet, ananykents, and correct and any attached copy is a true copy of the original documents Joseph J. Kalodka Name Of Pages including cover sheet, ananykents, and correct and any attached copy is a true Copy of the original documents Do NOT USE THIS SPACE Statement and signature. Teth ammber of pages including cover sheet, ananykents, and correct and any attached copy is a true Copy of the original documents Do NOT DETACH THIS PORTION Mail documents to be recorded with required cover sheet information to		Internal Address:
X Assignment Merger Security Agreement Change of Name Other	conveying party(ies)	Street Address: 46, Quai A. Le Gallo F-92100 Boulogne -Billancourt, France
Execution Date: Tune 28, 2004, respectively Yes No X 4. Application number(s) or pattern number(s) or pattern number(s) or pattern number(s) or pattern number(s). B. Patent Application is: B. Patent Application No.(s) B. Patent No.(s) Filed July 2, 2004 Serial No. 10/884,158 Additional numbers statched? Yes No X 5. Mame and address of party to whom correspondence concerning document should be realide: No X 6. Total number of applications and patents involved] Name: JOSEPHS, TRPOLI 7. Total Pec (37 CFR 3.41): \$40.00 Internal Address: Thomson Licensing Inc. 7. Total Pec (37 CFR 3.41): \$40.00 Street Address: 2 Independence Way 8. Deposit account number: 07-0832 City: PRINCETON State: NEW JERSEY Zip :08543-5312 DO NOT USE THIS SPACE 9. Statement and signature. To the best of nv knowledge and bellef, the foregoing information is true and correct and any attached copy is a true copy of the original document. Joseph J. Kolodka Joseph J. Kolodka Name of Person Signing Yes and the prevent sheet information to the set information cover sheet information to to: Joseph J. Kolodka Joseph J. Kolodka Mail documents to be recorded with required cover sheet information to: Jos Statemer commissioner for Patentas Box Assignments <td>X Assignment Merger Security Agreement Change of Name</td> <td>City: State: Zip:</td>	X Assignment Merger Security Agreement Change of Name	City: State: Zip:
A pplication number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: A. Patent Application No.(s) Filed July 2, 2004 Serial No. 10/884,158 Additional numbers statehed? Yes No X No X Name and address of party to whom correspondence concerning document should be mailed: Name: JOSEPH S. TRIPOLI Internal Address: 2 Independence Way City: PRINCETON Super NEW JERSEY Zip: 08543-5312 DO NOT USE THIS SPACE 9. Statement and signature. To the best of ny knowledge and belief; the foregoing information is true and correct and any attached copy is a true copy of the ariginal document. Joseph J. Kolodka Name of Person Signing Total number of pages including cover sheet, standorents, and document: Joseph J. Kolodka Name of be recorded with required cover sheet information to: Assistant Commissioner for Patents By Assignments		Yes No K
Filed July 2, 2004 Serial No. 10/884,159 Additional numbers attached? Yes Name and address of party to whom correspondence concerning document should be malacit. 6. Total number of applications and patents involved: _]	4. Application number(s) or patent number(s):	
Additional numbers statehed? Yes No X 5. Name and address of party to whom correspondence concerning document should be mailed: Name: JOSEPH S. TRIPOLI Internal Address: Thomson Licensing Inc. 6. Total number of applications and patents involved: _1	A. Patent Application No.(s)	B. Patent No.(s)
5. Name and address of party to whom correspondence concerning document should be mailed: Name: JOSEPH S. TRIPOLI Internal Address: Thomson Licensing Inc 6. Total number of applications and patents involved:1	Filed July 2, 2004 Serial No. 10/884,158	
concerning document should be mailed: Name: JOSEPH S. TRIPOLI internal Address: Thomson Liccusing Inc 7. Total Fee (37 CFR 3.41): \$40.00 Street Address: 2 Independence Way 8. Deposit account number: 07-0832 City: PRINCETON State: NEW JERSEY Zip :08543-5312 DO NOT USE THIS SPACE 9. Statement and signature. 7. Total number of pages including cover sheet, attachments, and documer. 39,731 Joseph J. Kolodka Street, 4/94). Street, 4/94). Do NOT DETACH THIS PORTION Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patents Box Assignments	Additional numbers attached? Yes	 No X
Street Address: 2 Independence Way City: PRINCETON State: NEW JERSEY Zip :08543-5312 DO NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and bellef, the foregoing information is true and correct and any attached copy is a true copy of the original document. Joseph J. Kolodka Name of Person Signing Total number of pages including cover sheet, attachments, and doctment: OMB No. 0651-0011 (exp. 4/94) DO NOT DETACH THIS PORTION Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patenta Box Assignments	concerning document should be mailed:	6. Total number of applications and patents involved:1
Street Address: 2 Independence Way City: PRINCETON State: NEW JERSEY Zip :08543-5312 DO NOT USE THIS SPACE 9. Statement and signature. To the best of ny knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Joseph J. Kolodka Name of Person Signing Total number of pages including cover sheet, attachments, and document: OMB No. 0651-0011 (exp. 4/94) Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patenta Box Assignments	Internal Address: Thomson Licensing Inc	Enclosed
Do NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and bellef, the foregoing information is true and correct and any attached copy is a true copy of the original document. Joseph J. Kolodka Name of Person Signing Total number of pages including cover sheet, attachments, and document: JON NOT DETACH THIS PORTION Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patenta Box Assignments	· •	8. Deposit account number:
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. Joseph J. Kolodka Name of Person Signing Total number of pages including cover sheet, attachments, and document: OMB No. 0651-0011 (exp. 4/94) Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with requi		
To the best of my knowledge and bellef, the foregoing information is true and correct and any attached copy is a true copy of the original document. Joseph J. Kolodka Name of Person Signing Total number of pages including cover sheet, attachments, and document: 3 OMB No. 0651-0011 (exp. 4/94) Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to: Mail documents to be recorded with required cover sheet information to:	BO No	OT USE THIS SPACE
Total number of pages including cover sheet, attachments, and downest: 3 OMB No. 0651-0011 (exp. 4/94) DO NOT DETACH THIS PORTION Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patenta Box Assignments	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	
Total number of pages including cover sheet, attachments, and downest: 3 OMB No. 0651-0011 (exp. 4/94) DO NOT DETACH THIS PORTION Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patenta Box Assignments	Joseph J. Kolodka	5/ 4Fb 2005
OMB No. 0651-0011 (exp. 4/94) DO NOT DETACH THIS PORTION Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patenta Box Assignments		731 Date
DO NOT DETACH THIS PORTION Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patents Box Assignments	Total number of pages including cover sheet, attach/nents, and document: 3	
Mail documents to be recorded with required cover sheet information to: Assistant Commissioner for Patents Box Assignments		
Box Assignments		
	Ľ	lox Assignments

Public burden reporting for this sample cover sheet is estimated to average about 30 minutes per document to be recorded, including time for reviewing the document and gathering the data needed, and completing and reviewing the sample cover sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Office of Information Systems, PK2-1000C, Washington, D.C. 20231, and to the Office of Management and Budget, Paperwork Reduction Project (0651-0011), Washington, D.C. 20503.

PATENT REEL: 015659 FRAME: 0836

700151599

- 1 -

PF030096

ASSIGNMENT OF APPLICATION FOR UNITED STATES LETTER PATENT

WHEREAS Xavier DUCLOUX, 45 rue Michel Gérard, F-35200 RENNES, France; Patrice ALEXANDRE, 7 allée Morgane, F-35510 CESSON SEVIGNE, France; Ludovic NOBLET, Calleuvre, F-35830 BETTON, France; hereinafter referred (collectively) to as the assignor, have invented a certain improvement relating to

DEVICE AND METHOD FOR CODING VIDEO DATA

for which said assignor has caused an application for United States Letters Patent to be prepared,

- (xx) the inventor's declaration for said application being executed concurrently with the execution of this instrument; said application to be filed in the United States Patent and Trademark Office;
- () said application having been filed in the United States Patent and Trademark Office on Serial Number

AND WHEREAS

NEXTREAM France 17 rue du Petit Albi F-95800 Cergy Saint Christophe FRANCE

hereinafter referred to as the assignee, is desirous of acquiring the entire right, title and interest in and to said application, including any and all divisions and continuations thereof, and in and to said invention and any and all patents which may be granted therefor, including any and all renewals, reissues and prolongations thereof;

NOW THIS WITNESSETH, that for good and valuable consideration paid by said assignee to said assignor, the receipt of which is hereby acknowledged, said assignor hereby assigns, sells and transfers to said assignee, and said assignee's successors and assigns, the entire and exclusive right, title and interest in and to said application, including any and all divisions and continuations thereof, and in and to said invention and any and all patents which may be granted therefor, including any and all renewals, reissues and prolongations thereof; said assignee, and said assignee's successors and assigns, to have, hold, exercise and enjoy the said application, including any and all divisions and continuations thereof, and the said invention and any and all patents which may be granted therefor, including any and all renewals, reissues and prolongations thereof, with all the rights, powers, privileges and advantages in anywise arising from or appertaining thereto, for and during the term or terms of any and all such patents when granted, including any and all renewals, reissues and prolongations thereof, for the use and benefit of said assignee, and said assignee's successors and assigns, in as ample and beneficial a manner as the said assignor might or could have held and enjoyed the same, if this assignment had not been made.

AND said assignor hereby agrees to perform, upon the request of said assignee, or said assignee's successors or assigns, any and all acts relating to the obtaining or to the asserting of said patents, including any and all renewals, reissues and prolongations thereof.

AND said assignor authorizes and requests the Commissioner of Patents and Trademarks to issue Letters Patent on said application, and on any and all divisions and continuations thereof, to said assignee, and said assignee's successors and assigns, in accordance herewith.

PF030096 - 2 -EXECUTED, this <u>28th</u> day of <u>June</u>, 2004 ASSIGNOR: WITNESSES: Signature: Signature: Name: Xavier DUCLOUX Name: per thicire Address: Sree de 35230 St Arme Signature: Denis MAILLEUX Name: Address: 54 rue de Fougeres 35500 VITRE EXECUTED, this _2015 day of . 2004 ASSIGNOR: WITNESSES: Signature: _ Signature: Name: AT STOUTZ, Name: Patrice ALEXANDRE Address: 13 rue Chereau 35200 Rennes Signature<u>: <</u> DAVENET stephane Name: Address: La Haic 35520 HELESSE EXECUTED, this $\mathbb{Z}8^{+h}$ _day of June, 2004 WITNESSES: ASSIGNOR: Signature: Signature: michel JOVAN Name: Name: Ludovic NOBLET Address: 25 rue de l'Eav saint Aubin du cormier 35160 FR Signature: HAROUTEL Jean-Hichel Name: 15, squeres de Nirieque Address: 35200 RENNES

PATENT REEL: 015659-6RAME-0838-**

RECORDED: 02/04/2005