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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. Name of conveying party(ies)/Execution Date(s):</b><br>FILTRONIC COMTEK OY<br><br>Execution Date(s): <u>08/24/2005</u><br>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                 | <b>2. Name and address of receiving party(ies)</b><br>Name: <u>LK PRODUCTS OY</u><br>Internal Address: _____<br>Street Address: _____<br><br>Takatie 6<br><br>City: <u>Kempele</u><br>State: _____<br>Country: <u>FINLAND</u> Zip: <u>FIN-00440</u><br>Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                  |
| <b>3. Nature of Conveyance:</b><br><input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger<br><input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name<br><input type="checkbox"/> Government Interest Assignment<br><input type="checkbox"/> Executive Order 9424, Confirmatory License<br><input type="checkbox"/> Other _____                                                                                                                                                                                                       | <b>4. Application or patent number(s):</b> <input type="checkbox"/> This document is being filed together with a new application.<br>A. Patent Application No.(s) _____<br>B. Patent No.(s)<br><u>5,239,279</u><br><u>5,307,086</u><br><br>Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                            |
| <b>5. Name and address to whom correspondence concerning document should be mailed:</b><br>Name: <u>Melvin C. Garner</u><br><u>DARBY &amp; DARBY P.C.</u><br><br>Internal Address: Atty. Dkt.: 01329/8005409-000<br>Street Address: <u>P.O. Box 5257</u><br><br><br>City: <u>New York</u><br>State: <u>NY</u> Zip: <u>10150-5257</u><br>Phone Number: <u>(212) 527-7717</u><br>Fax Number: <u>(212) 753-8237</u><br>Email Address: <u>mgarner@darbylaw.com</u>                                                                                                                           | <b>6. Total number of applications and patents involved:</b> <span style="border: 1px solid black; padding: 2px 10px;">2</span><br><br><b>7. Total fee (37 CFR 1.21(h) &amp; 3.41)</b> \$ <u>80.00</u><br><input type="checkbox"/> Authorized to be charged by credit card<br><input checked="" type="checkbox"/> Authorized to be charged to deposit account<br><input type="checkbox"/> Enclosed<br><input type="checkbox"/> None required (government interest not affecting title) |
| <b>8. Payment Information</b><br>a. Credit Card Last 4 Numbers _____<br>Expiration Date _____<br>b. Deposit Account Number <u>04-0100</u><br>Authorized User Name <u>Flynn Barrison</u>                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>9. Signature:</b><br><div style="text-align: center; margin-top: 20px;"> <br/>       _____<br/>       Signature     </div> <div style="text-align: right; margin-top: 20px;">       _____<br/>       Date     </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>         _____<br/>         Flynn Barrison - 53,970<br/>         Name of Person Signing       </div> <div>         Total number of pages including cover sheet, attachments, and documents: <span style="border: 1px solid black; padding: 2px 10px;">2</span> </div> </div> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

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Dated: \_\_\_\_\_ Signature: \_\_\_\_\_ ()

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**ASSIGNMENT**

In consideration of the receipt of one (1) EURO from the Assignee:

We,

Filtronic Comtek Oy, Takatie 6, FIN-90440 Kempele, Finland  
(assignor)

hereby assigns to

LK Products Oy, Takatie 6, FIN-90440 Kempele, Finland  
(assignee)

our entire rights and interests for US Patents, namely

Patents:

US 5,239,279, US 5,307,036

For the assignor:

Kempele 24.6.2005

(place, date and signature of assignor)

Juha Mörö

Managing Director

Filtronic Comtek Oy

For the assignee:

Kempele 24.6.2005

(place, date and signature of assignee)

Jouni Anttila

Managing Director

LK Products Oy