

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

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|--|-------------------------|
| SUBMISSION TYPE: | NEW ASSIGNMENT |
| NATURE OF CONVEYANCE: | CHANGE OF NAME |
| CONVEYING PARTY DATA | |
| Name | Execution Date |
| UNWIRED BUYER | 08/01/2007 |
| RECEIVING PARTY DATA | |
| Name: | UNWIRED NATION |
| Street Address: | 3925 WEST BRAKER LANE |
| Internal Address: | MCC BUILDING, 3RD FLOOR |
| City: | AUSTIN |
| State/Country: | TEXAS |
| Postal Code: | 78759 |
| PROPERTY NUMBERS Total: 2 | |
| Property Type | Number |
| Application Number: | 11932758 |
| Application Number: | 12053422 |
| CORRESPONDENCE DATA | |
| Fax Number: | (512)327-5575 |
| <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i> | |
| Phone: | 512-327-5515 |
| Email: | jcandelas@tlgiplaw.com |
| Correspondent Name: | Jeffrey G. Toler |
| Address Line 1: | 8500 Bluffstone Cove |
| Address Line 2: | Suite A201 |
| Address Line 4: | Austin, TEXAS 78759 |
| ATTORNEY DOCKET NUMBER: | 1111-0007; 1111-0009 |
| NAME OF SUBMITTER: | James Candelas |
| Total Attachments: 2 | |
| source=UnWired_Nation_assumed_name#page1.tif | |

CH \$80.00 11932758

500516798

PATENT
REEL: 020819 FRAME: 0688

Form 503
(Revised 01/06)

Return in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX: 512 463-5709
Filing Fee: \$25



This space reserved for office use.

Assumed Name Certificate

Assumed Name

The assumed name under which the business or professional service is, or is to be, conducted or rendered is: UnWired Nation

Entity Information

The name of the entity filing the assumed name is:

UnWired Buyer, Inc.

State the name of the entity as currently shown in the records of the secretary of state or on its certificate of formation, if not filed with the secretary of state.

The filing entity is a: (Select the appropriate entity type below.)

- | | |
|--|---|
| <input checked="" type="checkbox"/> For-profit Corporation | <input type="checkbox"/> Professional Corporation |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Professional Limited Liability Company |
| <input type="checkbox"/> Cooperative Association | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Partnership |
| <input type="checkbox"/> Other | |

Specify type of entity if there is no check box applicable.

The file number, if any, issued to the filing entity by the secretary of state is: 800438046

The state, country, or other jurisdiction of formation is: Delaware

The registered or similar office of the entity in the jurisdiction of formation is:
Corporation Service Company

2711 Centerville Road, Suite 400

Wilmington, Delaware 19808

☒ The entity is required to maintain a registered office and agent in Texas. The address of its registered office in Texas and the name of the registered agent at such address is:

Business Filings Incorporated

701 Brazos Street, Austin, TX 78701

The address of the principal office of the entity (if not the same as the registered office) is:

3925 West Braker Lane, MCC Building, 3rd Floor, Austin, TX 78759

☐ The entity is not required to maintain a registered office and agent in Texas. Its office address in

in Texas is: _____

☐ The entity is not incorporated, organized or associated under the laws of Texas. The address of the principal place of business in this state is: _____

The office address of the entity is: _____

Period of Duration

☒ The period during which the assumed name will be used is 10 years from the date of filing with the secretary of state.

OR

☐ The period during which the assumed name will be used is _____ years from the date of filing with the secretary of state (not to exceed 10 years).

OR

☐ The assumed name will be used until _____ (not to exceed 10 years).
mm/dd/yyyy

County or Counties in which Assumed Name Used

The county or counties where business or professional services are being or are to be conducted or rendered under the assumed name are:

☒ All counties

☐ All counties with the exception of the following counties: _____

☐ Only the following counties: _____

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument. If the undersigned is acting in the capacity of an attorney in fact for the entity, the undersigned certifies that the entity has duly authorized the undersigned in writing to execute this document.

Date: August 1st, 2007

Indraj Gill (INDRAJ GILL)

CEO

Signature and title of authorized person(s) (see instructions)