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documents or the new address(es) below.

1. Name of conveying party(ies)

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2. Name and address of receiving party(ies)Name: Acacia Patent Acquisition LLC

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Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No**3. Nature of conveyance/Execution Date(s):**Execution Date(s) June 22, 2010☒ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Joint Research Agreement☐ Government Interest Assignment☐ Executive Order 9424, Confirmatory License☐ Other _____Street Address: 500 Newport Center Drive, 7th FloorCity: Newport BeachState: CACountry: USAZip: 92660Additional name(s) & address(es) attached? ☐ Yes ☒ No**4. Application or patent number(s):**

A. Patent Application No.(s)

☐ This document is being filed together with a new application.

B. Patent No.(s)

7392287

AUG 4 2010

Additional numbers attached? ☐ Yes ☒ No**5. Name and address to whom correspondence concerning document should be mailed:**Name: Cheryl Willeford

Internal Address: _____

Street Address: 500 Newport Center DriveCity: Newport BeachState: CAZip: 92660Phone Number: (949) 480-8350Fax Number: (949) 480-8301Email Address: cwilleford@acaciares.com**6. Total number of applications and patents involved: one****7. Total fee (37 CFR 1.21(h) & 3.41) \$ 80.00**☐ Authorized to be charged by credit card☐ Authorized to be charged to deposit account☒ Enclosed☐ None required (government interest not affecting title)**8. Payment Information**

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Signature

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Cheryl Willeford

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Total number of pages including cover sheet, attachments, and documents:

4

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C SQUARED COMMUNICATIONS, LLC
(Licensor)

By GDS

TITLE NAME MANAGER

NAME FRANK A. DONALDSON

STATE OF FLORIDA
COUNTY OF Palm Beach

On June 22, 2010, before me BERNARD NEELS
Notary Public, personally appeared FRANK A. DONALDSON who
proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are
subscribed to the within instrument and acknowledged to me that he/she/they executed the same
in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument
the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of
the State of FLORIDA that the foregoing
paragraph is true and correct. WITNESS my hand and
official seal.



B. Neels

Signature of Notary

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