

PATENT ASSIGNMENT

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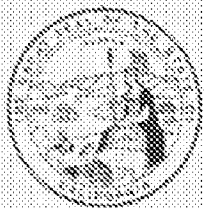
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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
Digital Dailies & Previews, LLC	07/12/2005
RECEIVING PARTY DATA	
Name:	Printless Previews, LLC
Street Address:	8942 Wonderland Park Ave
City:	Los Angeles
State/Country:	CALIFORNIA
Postal Code:	90046
PROPERTY NUMBERS Total: 1	
Property Type	Number
Patent Number:	5841512
CORRESPONDENCE DATA	
Fax Number:	(310)656-7069
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	3106567066
Email:	jeff@dovellaw.com
Correspondent Name:	Dovel & Luner, LLP
Address Line 1:	Suite 600
Address Line 4:	Santa Monica, CALIFORNIA 904012216
NAME OF SUBMITTER:	Sean Luner
Total Attachments: 1 source=Change name to Printless Previews#page1.tif	

OP \$40.00 5841512

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REEL: 025824 FRAME: 0139



State of California
Secretary of State

LIMITED LIABILITY COMPANY
CERTIFICATE OF AMENDMENT

A \$30.00 filing fee must accompany this form.

IMPORTANT - Read instructions before completing this form.

This Space For Filing Use Only

1. SECRETARY OF STATE FILE NUMBER 200513310053	2. NAME OF LIMITED LIABILITY COMPANY Digital Dailies & Previews, LLC
3. COMPLETE ONLY THE SECTIONS WHERE INFORMATION IS BEING CHANGED. ADDITIONAL PAGES MAY BE ATTACHED IF NECESSARY. A. LIMITED LIABILITY COMPANY NAME (END THE NAME WITH THE WORDS "LIMITED LIABILITY COMPANY," "LTD. LIABILITY CO." OR THE ABBREVIATIONS "LLC" OR "L.L.C.") Printless Previews, LLC B. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (CHECK ONE): ☐ ONE MANAGER ☐ MORE THAN ONE MANAGER ☐ ALL LIMITED LIABILITY COMPANY MEMBER(S) C. AMENDMENT TO TEXT OF THE ARTICLES OF ORGANIZATION: D. OTHER MATTERS TO BE INCLUDED IN THIS CERTIFICATE MAY BE SET FORTH ON SEPARATE ATTACHED PAGES AND ARE MADE A PART OF THIS CERTIFICATE. OTHER MATTERS MAY INCLUDE A CHANGE IN THE LATEST DATE ON WHICH THE LIMITED LIABILITY COMPANY IS TO DISSOLVE OR ANY CHANGE IN THE EVENTS THAT WILL CAUSE THE DISSOLUTION.	
4. FUTURE EFFECTIVE DATE, IF ANY: MONTH DAY YEAR	
5. NUMBER OF PAGES ATTACHED, IF ANY:	
6. IT IS HEREBY DECLARED THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. SIGNATURE OF AUTHORIZED PERSON: <u>[Signature]</u> DATE: <u>7-12-05</u> Dean Goodhill, Manager TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
7. RETURN TO: NAME: Richard K. Cillon, Esq. FIRM: Cillon & Deutsch ADDRESS: 10866 Wilshire Boulevard CITY/STATE: Los Angeles, CA ZIP CODE: 90024	

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RECORDED - 02/17/2011

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