

Substitute Form PTO-1595  
Attorney Docket No.: 07470-0240001

## RECORDATION FORM COVER SHEET PATENTS ONLY

Commissioner for Patents: Please record the attached original document(s) or copy(ies).		
<b>1. Name of conveying party(ies):</b> Mark Buxbaum, Dima V. Feinhaus and Tim Wakeling Additional name(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>2. Name and address of receiving party(ies):</b> Ab Initio Software LLC 201 Spring Street Lexington, MA 02421 Additional names/addresses attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>3. Nature of conveyance:</b> <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other: Execution Date: 08/24/2011; 08/24/2011; 08/24/2011		
<b>4. Application number(s) or patent number(s):</b> If this document is being filed with a new application, the execution date of the application is: A. Patent Application No(s).: 13/217,778 B. Patent No(s).: Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>5. Name/address of party to whom correspondence concerning document should be mailed:</b> PTO Customer Number: 26161 Fish & Richardson P.C.	<b>6. Total number of applications/patents involved:</b> 1 <b>7. Total fee (37 CFR §3.41):</b> \$40 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to charge Deposit Account. <b>8. Deposit Account No.:</b> 06-1050 Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.	
DO NOT USE THIS SPACE		
<b>9. Statement and Signature:</b> <i>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.</i>		
<u>Elliott J. Mason, III</u> Name of Person Signing	<u>/Elliott J. Mason, III Reg. No. 56,569/</u> Elliott J. Mason, III	<u>August 25, 2011</u> Date
Total number of pages including coversheet, attachments and document: 5		

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### CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify under 37 CFR §1.8(a) that this correspondence is being transmitted by facsimile in accordance with 37 CFR § 1.6(d).

8/25/11  
Date of Deposit

Paul J. Miele  
Signature

Paul J. Miele  
Typed Name of Person Signing Certificate

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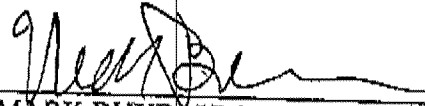
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Attorney Docket No.: 07470-0240001

ASSIGNMENT

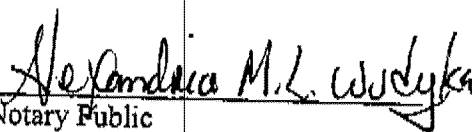
For valuable consideration, we, Mark Buxbaum, of 32 Brucewood Road Acton, MA 01720; Dima V. Feinhaus, of 12 York Road Newton, MA 02468; Tim Wakeling, of 11 Abbot Street Andover, MA 01810; hereby assign to AB INITIO SOFTWARE LLC, a limited liability company of Delaware, having a place of business at 201 Spring Street Lexington, MA 02421, and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of an application for United States Patent signed by us, entitled EVALUATING DATAFLOW GRAPH CHARACTERISTICS, filed August 25, 2011, and assigned U.S. Serial Number 13/217,778, and we authorize and request the attorneys appointed in said application to hereafter complete this assignment by inserting above the filing date and serial number of said application when known; this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and we agree for ourselves and our respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

Attorney Docket No.: 07470-0240001

DATE: 8/24/2011  
MARK BUXBAUMSTATE OF Massachusetts )  
COUNTY OF Middlesex ) SS.

On August 24, 2011, before me, the undersigned, a notary public for the State of Massachusetts, there personally appeared MARK BUXBAUM personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.

ALEXANDRIA M. L. WUDYKA  
NOTARY PUBLIC  
Commonwealth of Massachusetts  
My Commission Expires  
June 14, 2013  
Notary Public

Attorney Docket No.: 07470-0240001

DATE:

8/24/2011DIMA V. FEINHAUSSTATE OF Massachusetts )  
COUNTY OF Middlesex ) SS.

On August 24, 2011, before me, the undersigned, a notary public for the State of Massachusetts, there personally appeared DIMA V. FEINHAUS personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.



ALEXANDRIA M. L. WUDYKA  
NOTARY PUBLIC  
Commonwealth of Massachusetts  
My Commission Expires  
June 14, 2013

Alexandria M.L. Wudyka  
Notary Public

Attorney Docket No.: 07470-0240001

DATE:

8/24/11

TIM WAKELING

STATE OF Massachusetts )  
COUNTY OF Middlesex ) SS.

On August 24, 2011, before me, the undersigned, a notary public for the State of Massachusetts, there personally appeared TIM WAKELING personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.

ALEXANDRIA M. L. WUDYKA  
NOTARY PUBLIC  
Commonwealth of Massachusetts  
My Commission Expires  
June 14, 2013Alexandria M. L. Wudyka  
Notary Public

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