

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
D & G Solutions, LLC	10/28/2011
RECEIVING PARTY DATA	
Name:	Zipbuds, LLC
Street Address:	6170 Cornerstone Court East Suite 260
City:	San Diego
State/Country:	CALIFORNIA
Postal Code:	92121
PROPERTY NUMBERS Total: 5	
Property Type	Number
Application Number:	12941943
Application Number:	29397922
Application Number:	13289830
Application Number:	12407375
Application Number:	11860508
CORRESPONDENCE DATA	
Fax Number:	(858)314-1501
Phone:	8583141500
Email:	kteuk@mintz.com
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>	
Correspondent Name:	JAMES P. CLEARY
Address Line 1:	3580 Carmel Mountain Road, Suite 300
Address Line 4:	SAN DIEGO, CALIFORNIA 92130
ATTORNEY DOCKET NUMBER:	43039-500
NAME OF SUBMITTER:	Andrew D. Skale
Total Attachments: 2 source=43039- Name Change#page1.tif source=43039- Name Change#page2.tif	

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PATENT
REEL: 027335 FRAME: 0890



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.

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

OCT 28 2011

This Space For Filing Use Only

1. SECRETARY OF STATE FILE NUMBER 200804710010	2. NAME OF LIMITED LIABILITY COMPANY D&G Solutions, 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.") <u>Zipbuds, LLC</u> B. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (CHECK ONE): <input type="checkbox"/> ONE MANAGER <input checked="" type="checkbox"/> MORE THAN ONE MANAGER <input type="checkbox"/> ALL LIMITED LIABILITY COMPANY MEMBER(S) C. AMENDMENT TO TEXT OF THE ARTICLES OF ORGANIZATION: None. 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: <table border="1"><thead><tr><th>MONTH</th><th>DAY</th><th>YEAR</th></tr></thead><tbody><tr><td></td><td></td><td></td></tr></tbody></table>		MONTH	DAY	YEAR							
MONTH	DAY	YEAR									
5. NUMBER OF PAGES ATTACHED, IF ANY: <u>0</u>											
6. IT IS HEREBY DECLARED THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. <table border="1"><tr><td>SIGNATURE OF AUTHORIZED PERSON <u>Robin Defay</u> TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON <u>Manager</u></td><td>DATE <u>10-28-11</u></td></tr></table>		SIGNATURE OF AUTHORIZED PERSON <u>Robin Defay</u> TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON <u>Manager</u>	DATE <u>10-28-11</u>								
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7. RETURN TO: <table border="1"><tr><td>NAME</td><td>Laura D. Ravine</td></tr><tr><td>FIRM</td><td>On-Call Counsel, Inc.</td></tr><tr><td>ADDRESS</td><td>5090 Shoreham Place, Suite 108</td></tr><tr><td>CITY/STATE</td><td>San Diego, CA</td></tr><tr><td>ZIP CODE</td><td>92122</td></tr></table>		NAME	Laura D. Ravine	FIRM	On-Call Counsel, Inc.	ADDRESS	5090 Shoreham Place, Suite 108	CITY/STATE	San Diego, CA	ZIP CODE	92122
NAME	Laura D. Ravine										
FIRM	On-Call Counsel, Inc.										
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ZIP CODE	92122										

SEC/STATE FORM LLC-2 (Rev. 03/2005) – FILING FEE \$30.00

APPROVED BY SECRETARY OF STATE



I hereby certify that the foregoing transcript of _____ page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

NOV 10 2011

Date: _____

Debra Bowen
DEBRA BOWEN, Secretary of State