08/01/2014 502919104

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT2965702

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
ORON MICHAEL	08/01/2014

RECEIVING PARTY DATA

Name:	WINBOND ELECTRONICS CORPORATION	
Street Address:	NO. 8, KEYA 1ST RD., DAYA DIST., CENTRAL TAIWAN SCIENCE PARK	
City:	TAICHUNG CITY, 428	
State/Country:	TAIWAN	

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	14450188

CORRESPONDENCE DATA

Fax Number: (612)234-4718

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent

using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: 612-246-3850 Email: David@dhcip.com **Correspondent Name:** DAVID H. CARROLL Address Line 1: 2100 16TH ST. UNIT 311 Address Line 4: DENVER, COLORADO 80202

ATTORNEY DOCKET NUMBER:	1770.038.US1N	
NAME OF SUBMITTER: DAVID H. CARROLL		
SIGNATURE:	/David H. Carroll, Reg. # 29903/	
DATE SIGNED:	08/01/2014	

Total Attachments: 3

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> **PATENT** REEL: 033450 FRAME: 0453 502919104

ASSIGNMENT

For good and valuable consideration, the receipt, sufficiency and adequacy of which are hereby acknowledged, I

Oron Michael of San Jose, California, USA

have sold, assigned and transferred, and do hereby sell, assign and transfer, to WINBOND ELECTRONICS CORPORATION (hereinafter "Assignee"), a corporation of Taiwan, having a place of business at No. 8, Keya 1st Rd., Daya Dist., Central Taiwan Science Park, Taichung City, 428, Taiwan, its successors, legal representatives, assigns and nominees, my entire right, title and interest throughout the world in and to the invention(s) described in the patent application:

NAND FLASH MEMORY HAVING INTERNAL ECC PROCESSING AND METHOD OF OPERATION THEREOF

which names inventor Oron Michael which is identified by Attorney Docket Number 1770.038.US1N and which was filed on <u>08/01/2014</u> and assigned Serial No. <u>14/450,188</u>;

and in all patent applications and patents for such invention(s) of every country and under any national law or any regional or international conventions, including provisionals, nonprovisionals, originals, divisions, continuing applications including continuations and continuations-in-part, international applications, reissues, reexaminations, substitutes, renewals, and extensions thereof, and all rights of priority and claims to earlier filing date benefits resulting from the filing of such applications. I authorize Assignee to apply for patents of foreign countries for the invention(s), including foreign national, regional, and international applications, and to claim all rights of priority without further authorization from me. I agree to execute all papers and all other instruments and writings useful in connection with the United States and foreign patent applications and patents, including further application papers, affidavits, declarations, verified statements, oaths, assignments and other documents, and generally to do everything possible, including testifying in legal proceedings, to aid Assignee, its successors, assigns and nominees, at their request and expense, in obtaining and enforcing patents for the invention(s) in all countries. I hereby authorize and request any and all issuing authorities, including the Commissioner for Patents of the United States, to issue any and all United States and foreign patents granted for the invention(s) to Assignee and its successors, assigns and nominees.

I warrant and covenant that no assignment, sale, transfer, grant, mortgage, license agreement or other encumbrance affecting the rights and property herein conveyed has been or will be made to others by the undersigned, and that the full right to convey the same as herein — PAGE 1 OF 2 —

PATENT REEL: 033450 FRAME: 0454 expressed is possessed by me.

I hereby authorize Assignee, its successors and assigns, or anyone it may properly designate, to insert in this instrument the application number and filing date of the Patent Application once known.

EXECUTED THIS $\frac{1}{2}$ D	AY OF <u>AV 405</u> , 20	2014. Oron Michael	
State of	U	Oron Michael	
State of County of)		
County of)		
On befo	re me,	, personally appeared	
Oron Michael, personally I	known to me or proved	ed to me on the basis of satisfactory evidence	
executed the same in his a	authorized capacity, ar	ithin instrument, and acknowledged to me that and that by his signature on the instrument, the person acted, executed the instrument.	
WITNESS my hand and o	ficial seal:		
	Notar	ry Public	
[SEAL]	By and	nd for the State of	
	Му Сс	Commission expires:	

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

CERTIFICATE OF	ACKNOWLEDGMENT
State of California	
County of Santa Clara	
On August 1, 2014 before me, Rani L. Card	dinaux, Notary Public (Here insert name and title of the officer)
personally appeared Oron Michael	
the within instrument and acknowledged to me th	dence to be the person(s) whose name(s)(is)are subscribed to hat he/she/they executed the same in his her/their authorized) on the instrument the person(s), or the entity upon behalf of ht.
I certify under PENALTY OF PERJURY under this true and correct.	ne laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal. Signature of Notary Public	RANI L. CARDINAUX Commission No. 1957644 NOTARY PUBLIC-CALIFORNIA SANTA CLARA COUNTY My Comm. Expires OCTOBER 22, 2015
ADDITIONAL O	PTIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT Assignment (Title or description of attached document) (Title or description of attached document continued)	INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

CAPACITY CLAIMED BY THE SIGNER

Number of Pages 2 Document Date 8/1/2014

(Additional information)

- Individual (s)
- ☐ Corporate Officer

(Title)

- □ Partner(s)□ Attorney-in-Fact
- ☐ Trustee(s)
- ☐ Other

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible.
 Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - Indicate title or type of attached document, number of pages and date.
 - Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- · Securely attach this document to the signed document

PATENT

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