

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT3125058

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	CHANGE OF NAME	
CONVEYING PARTY DATA		
	Name	Execution Date
	ROAM, LLC	06/18/2014
RECEIVING PARTY DATA		
Name:	ROAM, INC.	
Street Address:	1877 CENTRO WEST	
City:	TIBURON	
State/Country:	CALIFORNIA	
Postal Code:	94920	
PROPERTY NUMBERS Total: 1		
	Property Type	Number
	Application Number:	29492500
CORRESPONDENCE DATA		
Fax Number:	(650)556-1940	
<i>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.</i>		
Phone:	6504651949	
Email:	synlaw@syndicatedlaw.com	
Correspondent Name:	BRIAN S. BOYER, PH.D.	
Address Line 1:	460 SEAPORT COURT	
Address Line 2:	SUITE 101	
Address Line 4:	REDWOOD CITY, CALIFORNIA 94063	
ATTORNEY DOCKET NUMBER:	LAMAP002US01	
NAME OF SUBMITTER:	BRIAN S. BOYER, PH.D.	
SIGNATURE:	/Brian S. Boyer/	
DATE SIGNED:	11/26/2014	
Total Attachments: 2		
source=LAMA_LAMAR-AUDIO-LLC_AMENDMENT-NAME-TO-ROAM-LLC_CUTE#page1.tif		
source=LAMA_LAMAR-AUDIO-LLC_AMENDMENT-NAME-TO-ROAM-LLC_CUTE#page2.tif		

LLC-2

**Amendment to Articles of Organization
of a Limited Liability Company (LLC)**

To change information of record for your California LLC, you can fill out this form, and submit for filing along with:

- A \$30 filing fee.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.
- To file this form, the status of your LLC must be active on the records of the California Secretary of State, or if suspended, this form can only be filed to list a new LLC name. To check the status of the LLC, go to kepler.sos.ca.gov.

Important! To change the LLC addresses, or to change the name or address of the LLC's agent for service of process, you must file a Statement of Information (Form LLC-12). To get Form LLC-12, go to www.sos.ca.gov/business/be/statements.htm.

Items 4-6: Only fill out the information that is changing. Attach extra pages if you need more space or need to include any other matters.

FILED RMB
Secretary of State
State of California

JUN 18 2014 DV

1PC
This Space For Office Use Only

For questions about this form, go to www.sos.ca.gov/business/be/filing-tips.htm.

① **LLC's Exact Name** (on file with CA Secretary of State)

LAMAR AUDIO, LLC

② **LLC File No.** (Issued by CA Secretary of State)

201334310362

Purpose

- ③ The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

New LLC Name (List the proposed LLC name exactly as it is to appear on the records of the California Secretary of State.)

④ ROAM, LLC

Proposed LLC Name

The proposed new name must include: LLC, L.L.C., Limited Liability Company, Limited Liability Co., Ltd. Liability Co. or Ltd. Liability Company; and may not include: bank, trust, trustee, Incorporated, Inc., corporation, or corp., insurer, or insurance company.

Management (Check only one.)

- ⑤ The LLC will be managed by:

☐ One Manager

☐ More Than One Manager

☐ All Limited Liability Company Member(s)

Amendment to Text of the Articles of Organization (List both the current text, and the text as amended by this filing.)

⑥

Read and sign below: Unless a greater number is provided for in the Articles of Organization, this form must be signed by at least one manager, if the LLC is manager-managed or at least one member, if the LLC is member-managed. If the signing manager or member is a trust or another entity, go to www.sos.ca.gov/business/be/filing-tips.htm for more information. If you need more space, attach extra pages that are 1-sided and on standard letter-sized paper (8 1/2" x 11"). All attachments are part of this document.

Sign here

Steven Lamar

Print your name here

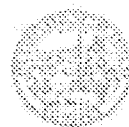
Manager

Your business title

Make check/money order payable to: Secretary of State
Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

By Mail
Secretary of State
Business Entities, P.O. Box 944228
Sacramento, CA 94244-2280

Drop-Off
Secretary of State
1500 11th Street, 3rd Floor
Sacramento, CA 95814



I hereby certify that the foregoing document of 1 page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

OCT 29 2014

Date: _____ *DS*

Debra Bowen
DEBRA BOWEN, Secretary of State