

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT3729915

<b>SUBMISSION TYPE:</b>	CORRECTIVE ASSIGNMENT	
<b>NATURE OF CONVEYANCE:</b>	Corrective Assignment to correct the CONVEYING PARTY DATA AND RECEIVING PARTY DATA ON THE COVERSHEET previously recorded on Reel 034484 Frame 0520. Assignor(s) hereby confirms the CHANGE OF NAME.	
<b>CONVEYING PARTY DATA</b>		
	<b>Name</b>	<b>Execution Date</b>
	LAMAR AUDIO, LLC	06/18/2014
<b>RECEIVING PARTY DATA</b>		
<b>Name:</b>	ROAM, LLC	
<b>Street Address:</b>	1877 CENTRO WEST	
<b>City:</b>	TIBURON	
<b>State/Country:</b>	CALIFORNIA	
<b>Postal Code:</b>	94920	
<b>PROPERTY NUMBERS Total: 1</b>		
	<b>Property Type</b>	<b>Number</b>
	Application Number:	29492500
<b>CORRESPONDENCE DATA</b>		
<b>Fax Number:</b>	(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>		
<b>Phone:</b>	6504651949	
<b>Email:</b>	synlaw@syndicatedlaw.com	
<b>Correspondent Name:</b>	SYNDICATED LAW	
<b>Address Line 1:</b>	503 SEAPORT CT	
<b>Address Line 2:</b>	SUITE 102	
<b>Address Line 4:</b>	REDWOOD CITY, CALIFORNIA 94063	
<b>ATTORNEY DOCKET NUMBER:</b>	LAMAP002US01	
<b>NAME OF SUBMITTER:</b>	BRIAN S. BOYER, PH.D.	
<b>SIGNATURE:</b>	/Brian S. Boyer/	
<b>DATE SIGNED:</b>	02/06/2016	
<b>Total Attachments: 3</b>		
source=LAMA_COVERSHEET_LAMAR-AUDIO-LLC_AMENDMENT-NAME-TO-ROAM-LLC_CUTE_ROTATED#page1.tif		
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		

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT3125058

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT	
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME	
<b>CONVEYING PARTY DATA</b>		
	<b>Name</b>	<b>Execution Date</b>
	ROAM, LLC	06/18/2014
<b>RECEIVING PARTY DATA</b>		
<b>Name:</b>	ROAM, INC.	
<b>Street Address:</b>	1877 CENTRO WEST	
<b>City:</b>	TIBURON	
<b>State/Country:</b>	CALIFORNIA	
<b>Postal Code:</b>	94920	
<b>PROPERTY NUMBERS Total: 1</b>		
	<b>Property Type</b>	<b>Number</b>
	Application Number:	29492500
<b>CORRESPONDENCE DATA</b>		
<b>Fax Number:</b>	(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>		
<b>Phone:</b>	6504651949	
<b>Email:</b>	synlaw@syndicatedlaw.com	
<b>Correspondent Name:</b>	BRIAN S. BOYER, PH.D.	
<b>Address Line 1:</b>	460 SEAPORT COURT	
<b>Address Line 2:</b>	SUITE 101	
<b>Address Line 4:</b>	REDWOOD CITY, CALIFORNIA 94063	
<b>ATTORNEY DOCKET NUMBER:</b>	LAMAP002US01	
<b>NAME OF SUBMITTER:</b>	BRIAN S. BOYER, PH.D.	
<b>SIGNATURE:</b>	/Brian S. Boyer/	
<b>DATE SIGNED:</b>	11/26/2014	
<b>Total Attachments: 2</b>		
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](http://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](http://www.sos.ca.gov/business/be/statements.htm).

Items 4-8: 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](http://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](http://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

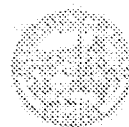
Manager

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