503757513 03/29/2016 PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:		NEW ASSIGNMENT		
NATURE OF CONVEYANCE:		ASSIGNMENT	ASSIGNMENT	
CONVEYING PARTY D	ΑΤΑ			
		Name	Execution Date	
THOMAS N. BERARDU	CCI		11/13/2015	
THOMAS KURIAN			11/18/2015	
PHILIP GERSKOVICH			08/18/2015	
VALIK SOLORZANO BA	ARBOZA		12/10/2015	
EURO BEINAT			08/17/2015	
CAROLYN M. RICCI			08/03/2015	
RECEIVING PARTY DA				
Name:	ZIH CORP.			
Street Address:	3 OVE	3 OVERLOOK POINT		
City:	LINCO	LINCOLNSHIRE		
	ILLINOIS			
State/Country:	ILLINC	DIS		
State/Country: Postal Code:	ILLINC 60069	DIS		
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ASSIGNMENT - WORLDWIDE

For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, each undersigned inventor has sold and assigned, and by these presents hereby sells and assigns, unto

ZIH CORP.

3 Overlook Point Lincolnshire, Illinois 60069

its successors and assigns, the entire right, title and interest, so far as concerns the United States and the Territories and Possessions thereof and all foreign countries in and to the invention in "METHOD AND APPARATUS FOR MANAGING REMOTE DEVICES AND ACCESSING REMOTE DEVICE INFORMATION"

as set forth in this United States Patent Application

executed concurrently herewith

executed on

Application No. <u>14/524,372</u>; filed on <u>10/27/2014</u>

Application claims priority from Provisional Application No. 61/895,993, filed 10/25/2013, all applications listed above being hereinafter referred to as the "application(s)";

said application for United States Letters Patent, including all divisional, renewal, substitute, continuation, nonprovisionals, continuation-in-parts, and Convention applications based in whole or in part upon said inventions or upon said applications, and any and all Letters Patent and reissues, reexaminations, and extensions of Letters Patent granted for said inventions or upon said applications and every priority right that is or may be predicated upon or arise from said inventions, said applications, and said Letters Patent; said Assignee being hereby authorized to file patent applications in any or all countries on any or all said inventions in the name of the undersigned or in the name of said Assignee or otherwise as said Assignee may deem advisable. under the International Convention or otherwise; the Commissioner of Patents and Trademarks of the United States of America being hereby authorized to issue or transfer all said Letters Patent to said Assignee in accordance herewith; this assignment being under covenant, not only that full power to make the same is had by the undersigned, but also that such assigned right is not encumbered by any grant, license, or other right theretofore given, and that the undersigned will do all acts reasonably serving to ensure that the said inventions, patent applications and Letters Patent shall be held and enjoyed by said Assignee as fully and entirely as the same could have been held and enjoyed by the undersigned if this assignment had not been made, and particularly to execute and deliver to said Assignee all lawful documents including petitions, specifications, oaths, assignments, invention disclaimers, declarations, and lawful affidavits in form and substance which may be requested by said Assignee, to furnish said Assignee with all facts relating to said inventions or the history thereof and any and all documents, photographs, models, samples or other physical exhibits which may embody said inventions, and to testify in any proceedings relating to said inventions, patent applications, and/or Letters Patent.

Page 1 of 7

Attorney Docket No. 054054/454035

This Assignment is deemed to be effective at least as early as the earliest priority date.

<u>11-13_2215</u> Date	Mount Bualinan
Witness:	Witness:
(Typed Name)	(Typed Name)
(Signature)	(Signature)
Date:	Date:
- OR -	
State of)	
County of	
I,, a Nota certify that Thomas N. Berarducci personall the due execution of the foregoing instrument	ry Public for said County and State, do hereby ly appeared before me this day and acknowledged t.
Witness my hand and official seal, this the	day of, 2014.
(Official Seal)	SEE ATTACHED NOTARY CERTIFICATE
My commission expires 11/20/20110	Notary Public

Page 2 of 7

Attorney Docket No. 054054/454035

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

	ntificate verifies only the identity of the individual who signed the not the truthfulness, accuracy, or validity of that document.
State of California Gounty of PLACER MNNEMBER_13, 0015 before me, Date Date Dersonally appeared "THDMAS_N_B	
	Name(s) of Signer(s)
who proved to me on the basis of satisfact of scalbed to the within instrument and ackr	tory evidence to be the person(s) whose name(s) is/are nowledged to me that he/she/they executed the same in by his/her/their signature(s) on the instrument the person(s) s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws
NICOLE E. GERMANO Commission # 1999509	of the State of California that the foregoing paragraph is true and correct.
Notary Public - California Sacramento County My Comm, Expires Nov 30, 2016	WITNESS my hand and official seal, Signature Signature of Notary Public
Notary Public - California Sacramento County My Comm, Expires Nov 30, 2016	Signature Signature of Notary Public
Notary Public - California Sacramento County My Comm, Expires Nov 30, 2016 Placo Notary Seal Above Enertain this section is optional, completing t haudulent reattachment of	Signature Signature of Notary Public
Notary Public - California Sacramento County My Comm, Expires Nov 30, 2016 Placo Motary Seal Above Description of Attached Document Hite or Type of Document:	Signature Signature of Notary Public OPTIONAL this information can deter alteration of the document or this form to an unintended document.

This Assignment is deemed to be effective at least as early as the earliest priority date.

NOVEMBER 18, 2015 Date	Thomas Kurian	
Witness:	Witness:	
(Typed Name)	(Typed Name)	
(Signature)	(Signature)	
Date:	Date:	
- OR -		
State of)		
) County of)		
l,, a N	lotary Public for said County a ppeared before me this day an	and State, do hereby d acknowledged the du
execution of the foregoing instrument.		
execution of the foregoing instrument.	e day of	, 2014.
execution of the foregoing instrument. Witness my hand and official seal, this the	e day of	, 2014.
certify that Thomas Kurian personally apexecution of the foregoing instrument. Witness my hand and official seal, this the Official Seal)	e day of Notary Publ	-

Attorney Docket No. 054054/454035 **PATENT REEL: 038119 FRAME: 0655** A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document.

,

.

State of California	Optional Section
County of Alameda	Capacity claimed by signer
	O Individual
	O Corporate Officer(s)
On 11/12/15 Before me, Leslee Belmont, Notary Public, personally	
appeared:	Title(s)
	⊖ Partners
Thomas Nutrian	O Limited
	O General
	O Attorney in Fact
	O Trustee
Who proved to me on the basis of satisfactory evidence to be the person (s) whose name	O Guardian/Conservator
(s) is/are subscribed to this instrument, and acknowledged that he/she/they executed the same in his/her/their authorized capacity (ies) and that by his/her/their signature (s) on	O Other
the instrument the person (s), or the entity upon behalf of which the person acted,	
executed the instrument.	
I certify under PENALTY OF PERJURY under the laws of the State of California that the	Signer is representing:
foregoing paragraph is true and correct.	Name of person(s) or entity(ies)
	Hame of person(s) of entity(es)
Witness my hand and official seal.	
E COMM. #2126481 E	
ALAMEDA COUNTY My Comm. Expires Oct. 8, 2019	
Leslee Belmont	
Optional Section	
Title or type of document <u>CSSymmet</u>	
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Number of pages Date of document	

This Assignment is deemed to be effective at least as early as the earliest priority date.

8-18-2015

Date

Philip Gerskovich

Witness: 1ervi (Typed Name) Signature)

18,2015 Date: HUA

Witness:

Notary Public

(Signature)

Date:

- OR -

State of County of

I, ______, a Notary Public for said County and State, do hereby certify that **Philip Gerskovich** personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the _____ day of _____, 2014.

(Official Seal)

My commission expires _____

Page 4 of 7

Attorney Docket No. 054054/454035

This Assignment is deemed to be effective at least as early as the earliest priority date.

2/10/2015 Valik Solorzano Barboza Witness: Witness: JALIK SOLORZAND BARBORA (Typed Name) JAZAIN GALLARDO GARCES (Typed Name) Lay Unit Hauth (Signature) (Signature) Date: 12/10/2015 Date: 12/10/2015- OR -State of _____) County of _____ I, ______, a Notary Public for said County and State, do hereby certify that Valik Solorzano Barboza personally appeared before me this day and acknowledged the due execution of the foregoing instrument. Witness my hand and official seal, this the _____ day of _____, 2014. (Official Seal) Notary Public My commission expires

Page 5 of 7

Attorney Docket No. 054054/454035

This Assignment is deemed to be effective at least as early as the earliest priority date.

17 AUGURT ZOIT Date	Euro Beinat
· · · · · · /	
Witness:	Witness:
Sebastian Hormons (Typed Name)	(Typed Name)
(Signature)	(Signature)
Date: 17-ang-2015	Date: 17/08/2015
- OR -	
State of)	
County of)	
I,, a Notary certify that Euro Beinat personally appeared b execution of the foregoing instrument.	y Public for said County and State, do hereby before me this day and acknowledged the due
Witness my hand and official seal, this the	day of, 2014.
(Official Seal)	
My commission expires	Notary Public

Attorney Docket No. 054054/454035 **PATENT REEL: 038119 FRAME: 0659**

This Assignment is deemed to be effective at least as early as the earliest priority date.

Carolyn Carolyn

Witness:) ONALD ()mith' (Typed Name) (Signature)

Witness: Loraine Perru (Typed Name) (Signature)

Date: $\frac{8}{3}/\frac{5}{5}$

Date: 8

- OR -

State of _____ County of

I, ______, a Notary Public for said County and State, do hereby certify that Carolyn M. Ricci personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the _____ day of _____, 2014.

(Official Seal)

My commission expires

Notary Public

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Attorney Docket No. 054054/454035

PATENT REEL: 038119 FRAME: 0660

RECORDED: 03/29/2016