

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT3904831

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	MERGER AND CHANGE OF NAME
<b>EFFECTIVE DATE:</b>	02/18/2011
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
SONIC SOLUTIONS	02/18/2011
<b>NEWLY MERGED ENTITY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
SPARTA ACQUISITION SUB II LLC	02/18/2011
<b>MERGED ENTITY'S NEW NAME (RECEIVING PARTY)</b>	
<b>Name:</b>	SONIC SOLUTIONS LLC
<b>Street Address:</b>	101 ROWLAND WAY
<b>Internal Address:</b>	SUITE 100
<b>City:</b>	NOVATO
<b>State/Country:</b>	CALIFORNIA
<b>Postal Code:</b>	94945
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
<b>Patent Number:</b>	9235428
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(617)235-9492
<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>	6506174000
<b>Email:</b>	Pharrison@ropesgray.com
<b>Correspondent Name:</b>	ROPES & GRAY LLP
<b>Address Line 1:</b>	1900 UNIVERSITY AVENUE
<b>Address Line 2:</b>	6TH FLOOR
<b>Address Line 4:</b>	EAST PALO ALTO, CALIFORNIA 94303-2284
<b>ATTORNEY DOCKET NUMBER:</b>	003597-1256-102
<b>NAME OF SUBMITTER:</b>	PAMELA HARRISON
<b>SIGNATURE:</b>	/Pamela Harrison/
<b>DATE SIGNED:</b>	06/06/2016

PATENT

**Total Attachments: 2**

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# State of California Secretary of State

OBE MERG

**ENDORSED - FILED**  
In the office of the Secretary of State  
of the State of California

FEB 18 2011

## Certificate of Merger

(California Corporations Code sections  
1113(g), 6018.1, 8019.1, 9840, 12540.1, 15911.14, 16915(b) and 17552)

**IMPORTANT — Read all instructions before completing this form.**

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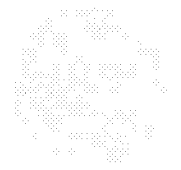
1. NAME OF SURVIVING ENTITY Sparta Acquisition Sub II LLC	2. TYPE OF ENTITY Limited Liability Company	3. CA SECRETARY OF STATE FILE NUMBER 201104010021	4. JURISDICTION California
5. NAME OF DISAPPEARING ENTITY Sonic Solutions	6. TYPE OF ENTITY Corporation	7. CA SECRETARY OF STATE FILE NUMBER C1525587	8. JURISDICTION California
9. THE PRINCIPAL TERMS OF THE AGREEMENT OF MERGER WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALLED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, SPECIFY THE CLASS AND THE NUMBER OF OUTSTANDING INTERESTS OF EACH CLASS ENTITLED TO VOTE ON THE MERGER AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS. ATTACH ADDITIONAL PAGES, IF NECESSARY.			
<u>SURVIVING ENTITY</u>		<u>DISAPPEARING ENTITY</u>	
<u>CLASS AND NUMBER</u> N/A	<u>AND</u> Vote of	<u>CLASS AND NUMBER</u> Common Stock - 100	<u>AND</u> Greater than 50%
1 member with 100% interest	sole member		
10. IF EQUITY SECURITIES OF A PARENT PARTY ARE TO BE ISSUED IN THE MERGER, CHECK THE APPLICABLE STATEMENT.			
<input checked="" type="checkbox"/> No vote of the shareholders of the parent party was required.		<input type="checkbox"/> The required vote of the shareholders of the parent party was obtained.	
11. IF THE SURVIVING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, PROVIDE THE REQUISITE CHANGES (IF ANY) TO THE INFORMATION SET FORTH IN THE SURVIVING ENTITY'S ARTICLES OF ORGANIZATION, CERTIFICATE OF LIMITED PARTNERSHIP OR STATEMENT OF PARTNERSHIP AUTHORITY RESULTING FROM THE MERGER. ATTACH ADDITIONAL PAGES, IF NECESSARY. Change of name of Sparta Acquisition Sub II LLC to Sonic Solutions LLC			
12. IF A DISAPPEARING ENTITY IS A DOMESTIC LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP, OR PARTNERSHIP, AND THE SURVIVING ENTITY IS NOT A DOMESTIC ENTITY OF THE SAME TYPE, ENTER THE PRINCIPAL ADDRESS OF THE SURVIVING ENTITY.			
PRINCIPAL ADDRESS OF SURVIVING ENTITY		CITY AND STATE	ZIP CODE
N/A			
13. OTHER INFORMATION REQUIRED TO BE STATED IN THE CERTIFICATE OF MERGER BY THE LAWS UNDER WHICH EACH CONSTITUENT OTHER BUSINESS ENTITY IS ORGANIZED. ATTACH ADDITIONAL PAGES, IF NECESSARY. N/A			
14. STATUTORY OR OTHER BASIS UNDER WHICH A FOREIGN OTHER BUSINESS ENTITY IS AUTHORIZED TO EFFECT THE MERGER. N/A		15. FUTURE EFFECTIVE DATE, IF ANY _____/_____/_____ (Month) (Day) (Year)	
16. ADDITIONAL INFORMATION SET FORTH ON ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE PART OF THIS CERTIFICATE.			
17. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.			
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY		DATE	
		2/18/11	
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY		DATE	
		2/18/11	
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY		DATE	
		2/18/11	
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY		DATE	
		2/19/11	
		Alfred J. Amoroso, Manager TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
		Stephen Yu, Manager TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
		Alfred J. Amoroso, President and CEO TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
		Stephen Yu, Secretary TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
For an entity that is a business trust, real estate investment trust or an unincorporated association, set forth the provision of law or other basis for the authority of the person signing: _____			

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OFFICE OF THE SECRETARY OF STATE  
CALIFORNIA

STATE OF CALIFORNIA

NOTARIAL PUBLIC  
STATE OF CALIFORNIA



My commission expires on \_\_\_\_\_

My commission expires on \_\_\_\_\_

My commission expires on \_\_\_\_\_

[Faint, illegible text, likely a notary record or certificate]



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

FEB 18 2011

Date: \_\_\_\_\_

*Debra Bowen*  
DEBRABOWEN, Secretary of State