PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4134298

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME AND THE ADDRESS OF THE ASSIGNEE

CONVEYING PARTY DATA

Name	Execution Date
PRINTRONIX, INC.	01/25/2016

RECEIVING PARTY DATA

Name:	PRINTRONIX AUTO ID TECHNOLOGY, INC.
Street Address:	3040 SATURN STREET, SUITE 200
City:	BREA
State/Country:	CALIFORNIA
Postal Code:	92821

PROPERTY NUMBERS Total: 18

Property Type	Number
Patent Number:	6535299
Patent Number:	6354503
Patent Number:	6082914
Patent Number:	6361228
Patent Number:	6840689
Patent Number:	7114654
Patent Number:	7646498
Patent Number:	7891892
Patent Number:	6997627
Patent Number:	6929412
Patent Number:	7114655
Patent Number:	7400989
Patent Number:	7037009
Patent Number:	7066667
Patent Number:	7348885
Patent Number:	7342499
Patent Number:	7261479
Patent Number:	7389931

CORRESPONDENCE DATA

PATENT REEL: 040579 FRAME: 0558

504087630

Fax Number: (703)997-4517

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: 3027291562

Email: Patent.admin.uspto.cr@naipo.com

Correspondent Name: WINSTON HSU **Address Line 1:** P.O.BOX 506

Address Line 4: MERRIFIELD, VIRGINIA 22116

ATTORNEY DOCKET NUMBER:	TSAP0016USA
NAME OF SUBMITTER:	SIBYL YU
SIGNATURE:	/SIBYL YU/
DATE SIGNED:	11/09/2016

Total Attachments: 9
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5 To: Mail Stop Assignment Recordation Services,

Director of the U.S. Patent and Trademark Office

P.O. Box 1450

Alexandria, VA 22313-1450

10 Subject: Request to record the new name and address of the assignee

Dear Sir:

Patent application(s) identified in Exhibit A attached hereto, request to record the new name and address of the assignee. The name of the assignee had been changed to "Printronix Auto ID Technology, Inc.", and the address had been changed to "3040 Saturn Street, Suite 200, Brea, CA 92821, U.S.A." The information from the Secretary of State of California (see Attachment) can support this fact. Please record the mentioned new name and address of the assignee.

20 Respectfully submitted,

/Scott Margo/ Date: 11/08/2016

Scott Margo, Patent Agent No. 56,277

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

25 Voice Mail: 302-729-1562

Facsimile: 806-498-6673

e-mail: ScottMargo@naipo.com

Note: Please leave a message in my voice mail if you need to talk to me. (The time in

D.C. is 13 hours behind the Taiwan time, i.e. 9 AM in D.C. = 10 PM in Taiwan.)

Exhibit A

United States Letters Patent(s)

	I	
Serial No.	Patent No.	Issue Date
1	6,535,299	2003/03/18
2	6,354,503	2002/03/12
3	6,082,914	2000/07/04
4	6,361,228	2002/03/26
5	6,840,689	2005/01/11
6	7,114,654	2006/10/03
7	7,646,498	2010/01/12
8	7,891,892	2011/02/22
9	6,997,627	2006/02/14
10	6,929,412	2005/08/16
11	7,114,655	2006/10/03
12	7,400,989	2008/07/15
13	7,037,009	2006/05/02
14	7,066,667	2006/06/27
15	7,348,885	2008/03/25
16	7,342,499	2008/03/11
17	7,261,479	2007/08/28
18	7,389,931	2008/06/24

5 End of Exhibit A

State of California

Secretary of State

NAME CHANGE CERTIFICATE OF QUALIFICATION

C1545477

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify that on the 25th day of January, 2016, there was filed in this office an Amended Statement and Designation by Foreign Corporation whereby the corporate name of PRINTRONIX, INC., a corporation organized and existing under the laws of Delaware, was changed to PRINTRONIX AUTO ID TECHNOLOGY, INC. This corporation complied with the requirements of California law in effect on that date for the purpose of qualifying to transact intrastate business in the State of California and as of said date has been and is qualified and authorized to transact intrastate business in the State of California, subject however, to any licensing requirements otherwise imposed by the laws of this State.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 25, 2016.



ALEX PADILLA Secretary of State

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1545417

Amended Statement By Foreign Corporation

FILED Secretary of State State of California

JAN 2 5 2016

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Printronix Auto ID Technology, Inc.		
[Name of Corporation	n]	
	of Delaware	
a corporation organized and existing under the laws	[State or Place of Incorporation]	
and which is presently qualified for the transaction	of intrastate business in the State of	
California, makes the following statement:		
That the name of the corporation has been change	ed to that hereinabove set forth and	
that the name relinquished at the time of such chang	ge was	
PRINTRONIX, INC.		
,	•	
	•	
	ut so	
[Signatu	ure of Corporate Officer]	
	e Fang, Secretary	
[Typed Name	e and Title of Officer Signing]	

ASDC-Form (Rev. 01/2013)

California Secretary of State www.sos.ca.gov/business/be (918) 657-5448

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PRINTRONIX, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "PRINTRONIX AUTO ID TECHNOLOGY, INC." ON THE TWENTY-SECOND DAY OF JANUARY, A.D. 2016, AT 6:18 O'CLOCK P.M.

है। प्रात्मकरता र र हो ति की सार चंद्रतियालों उद्धुप की कि स्मानिक स्थापनी किया स्थापनी की ति Carterio Secular of Spiles offic

2103270 8320 SR# 20160372073

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201720848

Date: 01-25-16

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

JAN 2 5 2016



State of California Secretary of State

Statement of Information

(Foreign Corporation) FEES (Filing and Disclosure): \$25.00. If this is an amendment, see instructions.

IMPORTANT - READ EISTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME Printronix Auto ID Technology, Inc. FILED

Secretary of State State of California JAN 2 6 2016

350 NF 350

2.	CALIFORNIA CORPORATE NOMBER OT	04041 <i>1</i>		inis St	ace for run	g ase only
No	Change Statement (Not applicable	e ii agent address of record is a P	O. Box address. See ins	tructions.)		
If there have been any changes to the information contained in the last Statement of information filed with the California Secretary of State, or no statement of information has been previously filed, this form must be completed in its entirety. If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to item 13.						
Co	implete Addresses for the Fallow	ring (Do not abbreviate the name	of the city, items 4 and 5 c	annot be P.O. Boxes	.)	2000
4.	STREET ADDRESS OF PRINCIPAL EXEC 15345 BARRANCA PARKWAY		CITY IRVINE		STATE CA	ZIP CODE 92618
5,	STREET AUDRESS OF PRINCIPAL BUSH 15345 BARRANCA PARKWA		CITY IRVINE		STATE CA	ZIP CODE 92618
6.	MAILING ADDRESS OF THE CORPORAT	ON, IF DIFFERENT THAN ITEMS	CITY		STATE	ZIP CODE
Na ma	imes and Complete Addresses of by be added; however, the preprinted titl	les on this form must not be altered,	rporation must list these th	ree officers. A compa	arable title t	or the specific officer
7.	chief executive officer/ Heing Lei Wang	ACDRESS 15345 BARRANCA PARK I	CITY WAY IRVINE		STATE CA	ZIP CODE 92618
8.	SECRETARY Julie Fang	AGDRESS 15345 BARRANCA P ARK I	WAY IRVINE		STATE CA	ZIP CODE 92618
9.	CHIEF FINANCIAL OFFICEIN Hsing Lei Wang	ADDRESS 15345 BARRANCA PARKI	CITY NAY IRVINE		STATE CA	ZIP CODE 92618
Agent for Service of Process if the agent is an insividual, the agent must reside in California and Item 11 must be completed with a California street address, a P.O. Box address is not socceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Gods section 1505 and Item 11 must be left blank.						
10. NAME OF AGENT FOR SERVICE OF PROCESS CORPORATION SERVICE COMPANY WHICH WILL DO BUSINESS IN CALIFORNIA AS CSC - LAWYERS INCORPORATING SERVICE						
13	STREET ADDRESS OF AGENT FOR SER	vice of procees in california, if	AN INDIVIDUAL CITY		STATE CA	2IP CODE
T)	pe of Eusiness		***************************************			
12. DESCRIBE THE TYPE OF DESIR CUS OF THE CURPORATION Thermal printers						
13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.						
	1-25-2016 Hsing Lei Wan DATE TYPE PROT NAME	G COS DERBOR COMPLETING FORM	President	<u>/s/</u>	SIGNATUR	E
	gananan iran iran ing pangan iran nanan iran iran iran iran iran i	Maria de la compansión de		######################################	coccoccoccoccoccoccoccoccoccoccoccoccoc	SECRETARY OF STATE

16-603052



State of California Secretary of State

Statement of Information

(Foreign Corporation)

FEES (Filling and Disclosure): \$25.00.
If this is an amendment, see instructions.

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATE NAME
 Printronix Auto ID Technology, Inc.

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FILED

Secretary of State State of California

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2. CALIFORNIA CORPORATE NUMBER C15		000000000000000000000000000000000000000	350 This Space	INTICC for Filing Use Only
No Change Statement (Not applicable		.O. Box address. See insi	tructions.)	
J. If there have been any changes to of State, or no statement of inform. If there has been no change in of State, check the box and pro	the information contained in t ation has been previously file any of the information contained	he last Statement of Info d, this form must be con	ormation filed with the npleted in its entirety.	
Complete Addresses for the Followi	ng (Co not abbreviate the name	of the city, Items 4 and 5 ca	annot be P.O. Boxes.)	
 STREET ADDRESS OF PRINCIPAL EXECUTION STREET ADDRESS OF P	TIVE OFFICE	city Brea		TATE ZIP CODE CA 92821
 STREET ADDRESS OF PRINCIPAL BUSING 3040 Saturn Street, Suite 200 	ESS OFFICE IN CALIFORNIA, IF ANY	city Brea	si C.	A 92821
MAILING ADDRESS OF THE CORPORATION	ON, IF DIFFERENT THAN ITEM 5	CITY	81	TATE ZIP CODE
Names and Complete Addresses of may be added; however, the preprinted title	es on this form must not be altered.	priporation must list these th) CHY	***************************************	e title for the specific office
Hsing Lei Wang	3040 Saturn Street, Suite :			A 92821
). SECRETARY Julie Fang	ADDRESS 3040 Saturn Street, Suite 2	cmy 200 Brea		ATE ZIP CODE CA 92821
n. CHIEF FINANCIAL OFFICER/ Kevin Aie	ADDRESS 3040 Saturn Street, Suite	спу 200 Вгеа		ATE ZIP CODE CA 92821
Agent for Service of Process If the a ddress, a P.O. Box address is not accepted ursuant to California Corporations Code so O. NAME OF AGENT FOR SERVICE OF PROC CORPORATION SERVICE CO INCORPORATING SERVICE	ole, if the agent is another corporati action 1505 and Item 11 must be le cass MPANY WHICH WILL DO I	on, the agent must have on eft blank.	file with the California Se	cretary of State a certifical
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13. THE INFORMATION CONTAINED HEREIN				
2-1-2016 Hsing Lei Wang		President	/s/	MAMADE
DATE TYPE/PRINT NAME	OF PERSON COMPLETING FORM	TITLE	SIG	NATURE
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Dated

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ALEX PADILLA, Secretary of State

PATENT REEL: 040579 FRAME: 0568

RECORDED: 11/09/2016