

## PATENT ASSIGNMENT COVER SHEET

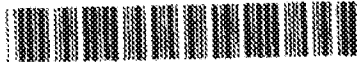
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EPAS ID: PAT4270690

|                                                                                                                                                                                                 |                                                                                                                                                              |                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| <b>SUBMISSION TYPE:</b>                                                                                                                                                                         | CORRECTIVE ASSIGNMENT                                                                                                                                        |                       |
| <b>NATURE OF CONVEYANCE:</b>                                                                                                                                                                    | Corrective Assignment to correct the THOMSON LICENSING LLC previously recorded on Reel 023704 Frame 0558. Assignor(s) hereby confirms the THOMSON LICENSING. |                       |
| <b>SEQUENCE:</b>                                                                                                                                                                                | 1                                                                                                                                                            |                       |
| <b>CONVEYING PARTY DATA</b>                                                                                                                                                                     |                                                                                                                                                              |                       |
|                                                                                                                                                                                                 | <b>Name</b>                                                                                                                                                  | <b>Execution Date</b> |
|                                                                                                                                                                                                 | MAX WARD MUTERSPAUGH                                                                                                                                         | 08/24/2007            |
| <b>RECEIVING PARTY DATA</b>                                                                                                                                                                     |                                                                                                                                                              |                       |
| <b>Name:</b>                                                                                                                                                                                    | THOMSON LICENSING                                                                                                                                            |                       |
| <b>Street Address:</b>                                                                                                                                                                          | 46 QUAI A. LE GALLO                                                                                                                                          |                       |
| <b>City:</b>                                                                                                                                                                                    | BOULOGNE-BILLANCOURT                                                                                                                                         |                       |
| <b>State/Country:</b>                                                                                                                                                                           | FRANCE                                                                                                                                                       |                       |
| <b>Postal Code:</b>                                                                                                                                                                             | 92100                                                                                                                                                        |                       |
| <b>PROPERTY NUMBERS Total: 1</b>                                                                                                                                                                |                                                                                                                                                              |                       |
|                                                                                                                                                                                                 | <b>Property Type</b>                                                                                                                                         | <b>Number</b>         |
|                                                                                                                                                                                                 | Application Number:                                                                                                                                          | 12664903              |
| <b>CORRESPONDENCE DATA</b>                                                                                                                                                                      |                                                                                                                                                              |                       |
| <b>Fax Number:</b>                                                                                                                                                                              |                                                                                                                                                              |                       |
| <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>                                                                                                                                                                                   | 609 734 6867                                                                                                                                                 |                       |
| <b>Email:</b>                                                                                                                                                                                   | PatentOPs.US@technicolor.com                                                                                                                                 |                       |
| <b>Correspondent Name:</b>                                                                                                                                                                      | PATRICIA A. VERLANGIERI                                                                                                                                      |                       |
| <b>Address Line 1:</b>                                                                                                                                                                          | 4 RESEARCH WAY                                                                                                                                               |                       |
| <b>Address Line 2:</b>                                                                                                                                                                          | THOMSON LICENSING LLC                                                                                                                                        |                       |
| <b>Address Line 4:</b>                                                                                                                                                                          | PRINCETON, NEW JERSEY 08540                                                                                                                                  |                       |
| <b>ATTORNEY DOCKET NUMBER:</b>                                                                                                                                                                  | PU070129-US-PCT SEQ 1                                                                                                                                        |                       |
| <b>NAME OF SUBMITTER:</b>                                                                                                                                                                       | PATRICIA A. VERLANGIERI                                                                                                                                      |                       |
| <b>SIGNATURE:</b>                                                                                                                                                                               | /Patricia A. Verlangieri, Reg.No. 42201/                                                                                                                     |                       |
| <b>DATE SIGNED:</b>                                                                                                                                                                             | 02/12/2017                                                                                                                                                   |                       |
| <b>Total Attachments: 3</b>                                                                                                                                                                     |                                                                                                                                                              |                       |
| source=assignment-pat-23704-558#page1.tif                                                                                                                                                       |                                                                                                                                                              |                       |
| source=assignment-pat-23704-558#page2.tif                                                                                                                                                       |                                                                                                                                                              |                       |



12-24-2009

Docket No.: PU070129  
CUSTOMER NO. 24498FORM PTO-1595  
Rev. 02/2004

103584432

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

12/16/09

REGISTRATION FORM COVER SHEET  
PATENTS ONLY

To the Honorable Assistant Commissioner for Patents: Please record the attached original documents or copy thereof.

## 1. Name of conveying party(ies):

Max Ward Motorspaugh

Additional name(s) of  
conveying party(ies)  
attached:

Yes

No ☒ X

## 3. Nature of conveyance:

☒ Assignment

Merger

☐ Security Agreement

Change of Name

☐ Other

Execution Date: August 24, 2007

## 4. Application number(s) or patent number(s).

If this document is being filed together with a new application, the execution date of the application is:

A. Patent Application No. (s) PCT/US2007/014967

B. Patent No. (s)

12 664 903

Additional numbers attached?

Yes

No

☒ X5. Name and address of party to whom correspondence  
concerning document should be mailed:Name: ROBERT D. SHEDD  
Internal Address: PATENT OPERATIONS  
Thomson Licensing Inc.

Street Address: P.O. Box 5312

City: PRINCETON State: NEW JERSEY Zip: 08543-5312

## 2. Name and address of receiving party(ies):

Name: THOMSON LICENSING, LLC

Internal Address:

Street Address: 46, Quai A. Le Gallé  
F-92100 Boulogne-Billancourt, France

City:

State:

Zip:

Additional name(s) &amp; address(es) attached?

Yes

No ☒ X6. Total number of applications and patents involved: 1

7. Total Fee (37 CFR 3.41): \$40.00

☐ Enclosed☒ Authorized to be charged to deposit account

8. Deposit account number:

07-0832

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## 9. Statement and signature:

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true  
copy of the original document.MICHAEL A. PUGEL  
Name of Person Signing

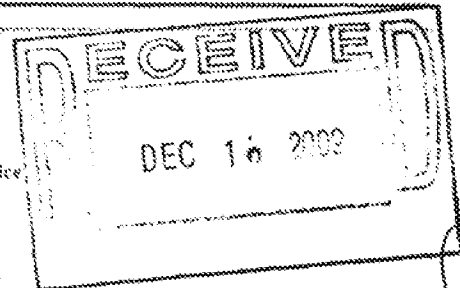
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Date

Total number of pages, including cover sheet, attachments, and document: 2

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/014967

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PATENT  
REEL: 041089 FRAME: 02598

# **ASSIGNMENT AND AGREEMENT IN AN APPLICATION FOR LETTERS PATENT OF THE UNITED STATES OF AMERICA**

I hereby declare that I am the sole inventor (if only one inventor is named below) or one of 1 joint inventors (if plural inventors are named below) of the inventions relating to APPARATUS AND METHOD FOR CONTROLLING A SIGNAL

described in an Application for Patent filed on JUNE 27, 2007 under Serial No. PGT/US07/014967 and described in the file associated with Docket No. PU070129 listed above or, if not identified here by filing date and serial number or by the Docket Number listed above, executed by me on even date with my execution of this Assignment/Agreement

For valuable consideration received, I hereby sell, assign and transfer to THOMSON LICENSING, a corporation duly organized and existing under the laws of the country of France, its successors, and assigns my entire right, title and interest, for all countries in and to said inventions, and all the rights and privileges under any and all Letters Patent that may be granted therefor, and any divisions, continuations, renewals and extensions thereof.

I agree that, when requested, I will, without charge to said corporation but at its expense, sign all papers, take all rightful oaths, make all rightful declarations and do all acts which may be necessary, desirable or convenient for securing and maintaining patents or other forms of protection for said inventions in any and all countries and for vesting title therein in said corporation, its successors, assigns or nominees.

I agree that I will communicate to said corporation or its representatives any facts known to me respecting said inventions and when requested by said corporation and at its expense will testify in any legal proceedings, and generally do everything possible to aid said corporation, its successors, assigns and legal representatives or nominees, to obtain or enforce proper protection for said inventions in any and all countries.

I authorize and empower said corporation, its successors, assigns or nominees, to make application for patent or other form of protection for said inventions in its or their own name, or in my name, in any and all countries and to invoke and claim for any application for patent or other form of protection for said inventions filed by it or them, the benefit of the right of priority provided by the International Convention for the Protection of Industrial Property, as amended, or by any convention which may hereafter be substituted for it, and to invoke and claim such right of priority without further written or oral authorization from me.

I hereby consent that a copy of this assignment shall be deemed a full legal and formal equivalent of any assignment, consent to file or like document which may be required in any country for any purpose and more particularly in proof of the right of the said corporation or its successors, assigns or nominees to apply for patent or other proper protection for said inventions, and to claim the aforesaid benefits of the right of priority provided by the International Convention for the Protection of Industrial Property, as amended, or by any convention which may hereafter be substituted for it.

I covenant with THOMSON LICENSING, its successors, assigns, legal representatives, and nominees, that to the best of my knowledge the right, title and interest herein conveyed by me are free and clear of any encumbrance, and that I have full right to convey the same as herein expressed.

|                     |                                             |      |                                                                  |
|---------------------|---------------------------------------------|------|------------------------------------------------------------------|
| Signed at           | INDIANAPOLIS, IN                            | Date | August 24, 2007                                                  |
| Inventor (1)        | MAX WARD MUTERSPAUGH<br>(Type or Print)     |      | <i>Max Ward Muterspaugh</i><br>(Signature in Full. No initials.) |
| Post Office Address | 582 HADLEIGH CT, WESTFIELD, IN 46074        |      |                                                                  |
| 1st Witness         | <i>Jacqueline Buford</i><br>(Type or Print) |      | <i>Jacqueline Buford</i><br>(Signature in Full. No initials.)    |
| 2nd Witness         | <i>Edmund M. Farn</i><br>(Type or Print)    |      | <i>Edmund M. Farn</i><br>(Signature in Full. No initials.)       |
| Signed at           |                                             | Date |                                                                  |
| Inventor (2)        |                                             |      | (Signature in Full. No initials.)                                |
| Post Office Address |                                             |      |                                                                  |
| 1st Witness         |                                             |      | (Signature in Full. No initials.)                                |
| 2nd Witness         |                                             |      | (Signature in Full. No initials.)                                |
| Signed at           |                                             | Date |                                                                  |
| Inventor (3)        |                                             |      | (Signature in Full. No initials.)                                |
| Post Office Address |                                             |      |                                                                  |
| 1st Witness         |                                             |      | (Signature in Full. No initials.)                                |
| 2nd Witness         |                                             |      | (Signature in Full. No initials.)                                |

After this Assignment has been recorded please RETURN to:

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THOMSON Licensing Inc  
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Princeton, NJ 08543-5312

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