

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5545980

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER AND CHANGE OF NAME
EFFECTIVE DATE:	04/01/2018
CONVEYING PARTY DATA	
Name	Execution Date
SONY INTERACTIVE ENTERTAINMENT AMERICA LLC	03/23/2018
NEWLY MERGED ENTITY DATA	
Name	Execution Date
SONY INTERACTIVE ENTERTAINMENT LLC	03/27/2018
MERGED ENTITY'S NEW NAME (RECEIVING PARTY)	
Name:	SONY INTERACTIVE ENTERTAINMENT LLC
Street Address:	2207 BRIDGEPOINTE PARKWAY
City:	SAN MATEO
State/Country:	CALIFORNIA
Postal Code:	94404
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	16425822
CORRESPONDENCE DATA	
Fax Number:	(510)668-0239
<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>	
Phone:	(510) 668-0965
Email:	josh@jdipatent.com
Correspondent Name:	JOSHUA D. ISENBERG
Address Line 1:	809 CORPORATE WAY
Address Line 4:	FREMONT, CALIFORNIA 94539
ATTORNEY DOCKET NUMBER:	SCEA07018US05
NAME OF SUBMITTER:	JOSHUA D. ISENBERG
SIGNATURE:	/Joshua D. Isenberg, Reg. No. 41088/
DATE SIGNED:	05/29/2019
Total Attachments: 2	

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REEL: 049311 FRAME: 0944

201635710028



State of California
Secretary of State

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FILED *JHP*
Secretary of State
State of California

MAR 27 2018

EFFECTIVE
DATE

4-1-18

Certificate of Merger

(California Corporations Code sections

1113(g), 3203(g), 6019.1, 8019.1, 9640, 12540.1, 15911.14, 16915(b) and 17710.14)

IMPORTANT — Read all instructions before completing this form.

1cc This Space For Filing Use Only

1. NAME OF SURVIVING ENTITY Sony Interactive Entertainment LLC	2. TYPE OF ENTITY LLC	3. CA SECRETARY OF STATE FILE NUMBER 201635710028	4. JURISDICTION CA
5. NAME OF DISAPPEARING ENTITY Sony Interactive Entertainment America LLC	6. TYPE OF ENTITY LLC	7. CA SECRETARY OF STATE FILE NUMBER 201701310323	8. JURISDICTION CA
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 NEEDED.)			
<u>SURVIVING ENTITY</u>		<u>DISAPPEARING ENTITY</u>	
<u>CLASS AND NUMBER</u> Sole Member	<u>AND</u> PERCENTAGE VOTE REQUIRED 100%	<u>CLASS AND NUMBER</u> Sole Member	<u>AND</u> PERCENTAGE VOTE REQUIRED 100%
10. IF EQUITY SECURITIES OF A PARENT PARTY ARE TO BE ISSUED IN THE MERGER, CHECK THE APPLICABLE STATEMENT. <input 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. N/A			
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			
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.			
14. STATUTORY OR OTHER BASIS UNDER WHICH A FOREIGN OTHER BUSINESS ENTITY IS AUTHORIZED TO EFFECT THE MERGER.		15. FUTURE EFFECTIVE DATE, IF ANY 04 - 01 - 2018 (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	
<i>[Signature]</i>		3/27/2018	
Tsuyoshi Kodera, Manager		TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
SIGNATURE OF AUTHORIZED PERSON FOR THE SURVIVING ENTITY		DATE	
<i>[Signature]</i>		3/23/18	
Shawn Layden, Manager		TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON	
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY		DATE	
SIGNATURE OF AUTHORIZED PERSON FOR THE DISAPPEARING ENTITY		DATE	
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON		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:			



I hereby certify that the foregoing
transcript 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.

MAR 28 2018

Date: _____

ALEX PADILLA, Secretary of State

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