

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5570692

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
KAPOW SOFTWARE	04/28/2011
RECEIVING PARTY DATA	
Name:	KAPOW TECHNOLOGIES, INC.
Street Address:	260 SHERIDAN AVE.
City:	PALO ALTO
State/Country:	CALIFORNIA
Postal Code:	94306
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	15469453
CORRESPONDENCE DATA	
Fax Number:	(408)971-4660
<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:	4089712573
Email:	emma@zilkakotab.com
Correspondent Name:	ZILKA-KOTAB PC
Address Line 1:	1155 N. 1ST ST.
Address Line 4:	SAN JOSE, CALIFORNIA 95112
ATTORNEY DOCKET NUMBER:	KFX1P058B
NAME OF SUBMITTER:	CHRISTOPHER P. COOK
SIGNATURE:	/CHRISTOPHER P. COOK/
DATE SIGNED:	06/13/2019
Total Attachments: 1	
source=ASSIGNNAMECHANGEKapowSoftwareToKapowTechnologiesInc#page1.tif	

READ INSTRUCTIONS ON REVERSE SIDE BEFORE

File Number: **550974**

No. of Pages: **1**

A MAILING NAME AND ADDRESS (OPTIONAL)
 NAME Legalzoom.com, Inc.
 ADDRESS 100 W. Broadway, Suite 100
 CITY Glendale STATE CA ZIP 91210



File Date: **4/26/2011**
 Expires: **4/26/2016**

Fee Total: **37.35**

Clerk ID: **030**

FICTITIOUS BUSINESS NAME STATEMENT

FILED WITH THE COUNTY CLERK-RECORDER OF SANTA CLARA
 COUNTY ON THE DATE IDENTIFIED ON THE FILING LABEL

REGINA ALCOMENDRAS, County Clerk - Recorder
SANTA CLARA COUNTY CLERK - RECORDER'S OFFICE

The following person (persons) is (are) doing business as: (Use the ADDENDUM page to list add)

1. FICTITIOUS BUSINESS NAME(S)
 (1) Kapow Software (2)

2. STREET ADDRESS OF PRINCIPAL PLACE OF BUSINESS CITY STATE ZIP COUNTY
260 Sheridan Ave., Ste. 420, Palo Alto, CA 94306 Santa Clara

If the principal place of business identified in #2 above is not in Santa Clara County, a current fictitious business name statement for the fictitious business name(s) identified in #1 above shall be on file at the above-identified County that is the principal place of business. If applicable, please complete #3 below.

3. ☐ THE PRINCIPAL PLACE OF BUSINESS IS IN _____ COUNTY AND A CURRENT FICTITIOUS BUSINESS NAME STATEMENT IS ON FILE AT THE COUNTY CLERK-RECORDER'S OFFICE OF SAID COUNTY.

This business is owned by: (An asterisk (*) item requires proof of registration with the California Secretary of State's Office)

4. ☐ AN INDIVIDUAL ☐ A GENERAL PARTNERSHIP ☐ A LIMITED PARTNERSHIP ☐ A LIMITED LIABILITY COMPANY
☐ AN UNINCORPORATED ASSOCIATION OTHER THAN A PARTNERSHIP ☒ A CORPORATION ☐ A TRUST ☐ COPARTNERS
☐ HUSBAND AND WIFE ☐ JOINT VENTURE ☐ STATE OR LOCAL REGISTERED DOMESTIC PARTNERS ☐ LIMITED LIABILITY PARTNERSHIP

The name and residence address of the owner(s) / registrant(s) is (are): (DO NOT USE P.O. BOX, PRIVATE MAIL BOX ADDRESSES)
 NOTE: General Partnerships, Copartnership, Joint Venture, Limited Liability Partnership, Unincorporated Association, and Limited Partnership - Insert name and residence address of each General Partner, Trusts - Insert the full name and residence address of each trustee; Limited Liability Company and Corporation - Insert full name and address of Limited Liability Company or Corporation as registered with the California Secretary of State's Office; State or local registered Domestic Partners - Insert full name and residence address of each Domestic Partner.
 USE THE ADDENDUM PAGE TO LIST ADDITIONAL NAMES AND ADDRESSES.

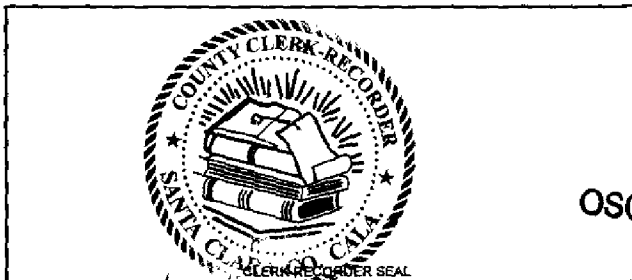
5. NAME ADDRESS CITY STATE ZIP
KAPOW TECHNOLOGIES, INC. 260 Sheridan Ave., Ste. 420, Palo Alto, CA 94306
 NAME ADDRESS CITY STATE ZIP
 NAME ADDRESS CITY STATE ZIP

Registrant/Owner began transacting business under the fictitious business name(s) listed above on:

6. ☒ DATE: 11/15/2010 ☐ NOT APPLICABLE

This filing is a:

7. ☒ First Filing (Publication Required)
☐ Refile of previous file # _____ (check appropriate boxes, below)
☐ Refiled prior to expiration or within 40 days past expiration, with NO CHANGES
☐ With changes (Publication Required)
☐ After 40 days of expiration date (Publication Required)
☐ Due to publication requirement not met on previous filing (Publication Required)



OSCAR URQUILLA
 By _____, Deputy
 Regina Alcomendras, Santa Clara County Clerk-Recorder

8. I declare that all information in this statement is true and correct. (A registrant who declares as true information which he or she knows to be false is guilty of a crime.)
 SIGNED Karyn Denise Smith PRINTED NAME Karyn Denise Smith
 If a CORPORATION, LIMITED LIABILITY COMPANY, LIMITED PARTNERSHIP or LIMITED LIABILITY PARTNERSHIP, the following must be completed:
 ENTITY NAME KAPOW TECHNOLOGIES, INC. TITLE / CAPACITY OF SIGNER VP-Finance
 ARTICLE / REG # 2650403 (from CA Sec of State's Office) ABOVE ENTITY WAS FORMED IN THE STATE OF DE

NOTICE - IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS BUSINESS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION. THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW [SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE].

Rev. 01/27/2010

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