

## PATENT ASSIGNMENT COVER SHEET

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<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT	
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT	
<b>CONVEYING PARTY DATA</b>		
	<b>Name</b>	<b>Execution Date</b>
	CYRIL JOUANLANNE	01/27/2020
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<b>Postal Code:</b>	31670	
<b>PROPERTY NUMBERS Total: 1</b>		
<b>Property Type</b>	<b>Number</b>	
<b>Application Number:</b>	16635831	
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<b>NAME OF SUBMITTER:</b>	CLARENCE A. GREEN	
<b>SIGNATURE:</b>	/cag24622/	
<b>DATE SIGNED:</b>	01/31/2020	
<b>Total Attachments: 2</b>		
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DECLARATION (37CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76) AND ASSIGNMENT

As the below named inventor, I hereby declare that:

This declaration is  
directed to :

☐ The attached application, or

☒ United States application number \_\_\_\_\_ or PCT  
international application number PCT/EP2018/072288 filed  
on August 17, 2018.

and was amended on (if applicable) \_\_\_\_\_.

Title: PATCH ANTENNA HAVING TWO DIFFERENT RADIATION MODES WITH TWO  
SEPARATE WORKING FREQUENCIES, DEVICE USING SUCH AN ANTENNA

The above-identified application was made or authorized to be made by me.

I believe that I am the original, first inventor or an original, first and joint inventor of a claimed  
invention in the application and for which a patent is sought.

I hereby state that I have reviewed and understand the contents of the above-identified  
application, including the specification and claims, as amended by any amendment referred to  
above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all  
information known to me to be material to patentability as defined in Title 37, Code of Federal  
Regulation, Section 1.56.

Whereas, I/we, the below-identified inventor(s), have invented certain new and useful  
improvements in the invention identified above and described in the above-identified application  
(referred to herein as the "Invention");

And, whereas I/we desire to assign the entire worldwide right, title and interest in and to the  
invention and to any and all patent applications and patents directed thereto to the Assignee  
identified below:

Assignee Name (if applicable): SIGFOX

Assignee Address (if applicable): 425, RUE JEAN ROSTAND  
31670 LABEGE  
FRANCE

Now, this indenture witnesseth, that for good and valuable consideration, the receipt whereof is  
hereby acknowledged;

I/we hereby assign, sell and transfer my/our above-identified rights, title and interest in said  
invention, said application identified above, including any divisions, continuations, and  
continuations-in-part thereof, and in and to any and all Letters Patent of the United States, and

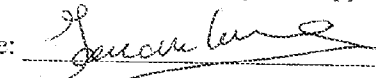
countries foreign thereto, which may be granted or have granted for said Invention, and in and to any and all reissues and reexaminations thereof, and in and to any and all priority rights, Convention rights, and other benefits accruing or to accrue to me/us with respect to the filing of applications for patents or securing of patents in the United States and countries foreign thereto, unto said Assignee;

And I/we hereby authorize and request the Director of the United States Patent and Trademark Office to issue any United States Letters Patent which may issue for said Invention to said Assignee, as assignee of the whole right, title and interest thereto;

And I/we further agree to sign and execute all necessary and lawful future documents, including applications for foreign patents, for filing divisions, continuations and continuations-in-part of said application for patent, and/or for obtaining any reissue or reissues of any Letters Patent which may be granted for my/our aforesaid Invention, as the Assignee or its Designee(s) may from time to time require and prepare at its own expense.

I/we hereby acknowledge that any willful false statement made in this declaration is punishable under 18 U.S.C. 1001 by fine or imprisonment of not more than five (5) years, or both.

Legal Name of Inventor (Assignor if applicable), Cyril JOUANLANNE:

Signature:  Date: 27-01-2020

Country of Citizenship: FR

Witnessed By (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Witnessed By (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_