

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT6590119

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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>               |
| GUY VINOGRAD  | 12/31/2020                          |
| MAOR LAST   | 01/05/2021                          |
| YOAV OFAN   | 01/03/2021                          |
| BEN ROSENCVEIG  | 01/07/2021                          |
| OLGA SHPIGEL  | 01/02/2021                          |
| DAVID RONEN   | 01/07/2021                          |
| <b>RECEIVING PARTY DATA</b>   |                                     |
| <b>Name:</b>  | SOFTIMIZE LTD.                      |
| <b>Street Address:</b>  | 125 BEN GURION DAVID STREET         |
| <b>City:</b>  | YEHUD-MONOSSON                      |
| <b>State/Country:</b>   | ISRAEL                              |
| <b>Postal Code:</b>   | 5624134                             |
| <b>PROPERTY NUMBERS Total: 1</b>  |                                     |
| <b>Property Type</b>  | <b>Number</b>                       |
| Application Number:   | 17148621                            |
| <b>CORRESPONDENCE DATA</b>  |                                     |
| <b>Fax Number:</b>  | (646)878-0801                       |
| <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>   | 646-878-0800                        |
| <b>Email:</b>   | USPTO@PearlCohen.com                |
| <b>Correspondent Name:</b>  | PEARL COHEN ZEDEK LATZER BARATZ LLP |
| <b>Address Line 1:</b>  | 7 TIMES SQUARE                      |
| <b>Address Line 2:</b>  | 19TH FLOOR                          |
| <b>Address Line 4:</b>  | NEW YORK, NEW YORK 10036            |
| <b>ATTORNEY DOCKET NUMBER:</b>  | P-591780-US                         |
| <b>NAME OF SUBMITTER:</b>   | DEBBIE CHITIZ                       |
| <b>SIGNATURE:</b>   | /DCH/                               |
| <b>DATE SIGNED:</b>   | 03/09/2021                          |

**Total Attachments: 7**

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**ASSIGNMENT**

In consideration of One Dollar (\$1.00), and other good and valuable consideration, the Receipt of which is hereby acknowledged, I the undersigned, VINOGRAD, Guy residing at 125a Ben Gurion Street, Yehud 5624134, Israel; LAST, Maor residing at Moshe Shamir 3, Petah Tikva 4951945, Israel; OFAN, Yoav residing at 7/1 Haofarim Street, Shaarey-Tikva 448100, Israel; ROSENCVEIG Ben residing at 21 Hadganim Street, Yehud 5647121, Israel; SHPIGEL, Olga residing at 2 Topaz Street, Apartment 18, Beer Yaakov 7031698, Israel and RONEN, David residing at 4 Hakeshet Street, Kfar Saba 4441410 , Israel (hereinafter, the "Assignor")

Hereby sell, assign and transfer to Softimize Ltd., an Israeli company located at 125 Ben Gurion David Street, Yehud-Monosson 5624134, Israel its successors, assigns and legal representatives (hereinafter, the "Assignee"), the entire right, title and interest for all countries, in and to any and all inventions which are disclosed and claimed, and as possessed by the undersigned, any and all inventions which are disclosed but not claimed in United States Patent Application No. (17/148,621) filed on (January 14, 2021) and being entitled:

**SYSTEMS AND METHODS FOR MANAGING A MULTI-REGION SAAS MODEL**

and in and to said application and all divisional, continuing, substitute, renewal, reissue, and all other applications for U.S. Letters Patent or other related property rights in any and all foreign countries which have been or shall be filed on any of said inventions disclosed in said application; and in and to all original and reissued patents or related foreign documents which have been or shall be issued on said inventions; and including the Assignor's right in and to all revenue, income, royalties, damages and payments now or hereafter due or payable with respect to any Letters Patent which may be granted, and in and to all causes of action (either in law or in equity), and the right to sue, counterclaim, and recover for past, present and future infringement of the rights assigned or to be assigned under this Assignment. I hereby authorize and request the attorney of record of the firm Pearl Cohen Zedek Latzer Baratz LLP, 1500 Broadway, 12<sup>th</sup> Floor, New York, New York 10036, to insert in the parentheses above, the filing date and US Serial No. of said application when known;

Authorize and request the Commissioner of Patents of the United States to issue to said Assignee, the corporation above named, its successors, assigns and legal representatives, in accordance with this assignment, any and all United States Letters Patent on said inventions or any of them disclosed in said application;

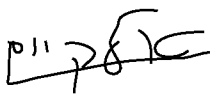
Agree that said Assignee may apply for and receive foreign Letters Patent or rights of any other kind for said inventions, or any of them; and may claim, in applications for said foreign Letters Patent

or other rights, the priority of the aforesaid United States patent application under the provisions of the International Convention of 1883 and later modifications thereof, under the Patent Cooperation Treaty, under the European Patent Convention or under any other available international agreement; and that, when requested, without charge to, but at the expense of, said Assignee, its successors, assigns and legal representatives, to carry out in good faith the intent and purpose of this assignment, the under-signed or the undersigned's executors or administrators will, for the United States and all foreign countries, execute all divisional, continuing, substitute, renewal, reissue, and all other patent applications or other documents on any and all said inventions; execute all rightful oaths, assignments, powers of attorney and other papers; communicate to said Assignee, its successors, assigns and representatives, all facts known and documents available to the undersigned relating to said inventions and the history thereof; testify in all legal proceedings; and generally do everything possible which said Assignee, its successors, assigns or representatives shall consider desirable for aiding in securing, maintaining and enforcing proper patent protection for said inventions and for vesting title to said inventions and all applications for patents or related foreign rights and all patents on said inventions, in said Assignee, its successors, assigns and legal representatives; and

**COVENANT** with said Assignee, its successors, assigns and legal representatives that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been made to others by the undersigned, and that full right to convey the same as herein expressed is possessed by the undersigned.

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|---|---|
| FULL NAME OF INVENTOR:<br><b>VINOGRAD, Guy</b>  | FULL NAME OF WITNESS:<br><i>Eliot J. Kiser</i>        |
| SIGNATURE OF INVENTOR:<br><i>Guy Vinograd</i>   | SIGNATURE OF WITNESS:<br><i>Eliot J. Kiser</i>        |
| DATE: <i>31/12/2020</i><br>(day / month / year) | ADDRESS OF WITNESS:<br><i>10 Golda Meir St. Yehud</i> |

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|---|---|
| FULL NAME OF INVENTOR:<br><b>LAST, Maor</b>           | FULL NAME OF WITNESS:<br>Akiva Elkayam  |
| SIGNATURE OF INVENTOR:<br><br><i>Maor Last</i>        | SIGNATURE OF WITNESS:<br><br> |
| DATE: _____<br>05 / 01 / 2021<br>(day / month / year) | ADDRESS OF WITNESS:<br>Rishon le zion , Shkolnik 2  |
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|---|-----------------------|
| FULL NAME OF INVENTOR:<br><b>OFAN, Yoav</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                      | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)         | ADDRESS OF WITNESS:   |

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|--|-----------------------|
| FULL NAME OF INVENTOR:<br><b>ROSENCVEIG, Ben</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                           | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)              | ADDRESS OF WITNESS:   |

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|--|-----------------------|
| FULL NAME OF INVENTOR:<br><b>SHPIGEL, Olga</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                         | SIGNATURE OF WITNESS: |
| DATE: _____                                    | ADDRESS OF WITNESS:   |



|   |   |
|---|---|
| FULL NAME OF INVENTOR:<br><b>OFAN, Yoav</b>   | FULL NAME OF WITNESS:<br><b>Ran Lev</b>                               |
| SIGNATURE OF INVENTOR:<br><i>Yoav Ofan</i>    | SIGNATURE OF WITNESS:<br><i>[Signature]</i>                           |
| DATE: <u>2/1/2021</u><br>(day / month / year) | ADDRESS OF WITNESS:<br><b>111 HADERA ST.<br/>PETACH TILVA, ISRAEL</b> |

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| FULL NAME OF INVENTOR:<br><b>ROSENCVEIG, Ben</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                           | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)              | ADDRESS OF WITNESS:   |

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|---|-----------------------|
| FULL NAME OF INVENTOR:<br><b>SPIGEL, Olga</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                        | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)           | ADDRESS OF WITNESS:   |

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| FULL NAME OF INVENTOR:<br><b>RONEN, David</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                        | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)           | ADDRESS OF WITNESS:   |

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| FULL NAME OF INVENTOR:<br><b>OFAN, Yoav</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                      | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)         | ADDRESS OF WITNESS:   |

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|---|---|
| FULL NAME OF INVENTOR:<br><b>ROSENCVEIG, Ben</b>  | FULL NAME OF WITNESS:<br><b>Kahana, Amir</b>  |
| SIGNATURE OF INVENTOR:<br> | SIGNATURE OF WITNESS:<br> |
| DATE: <u>7/1/2021</u><br>(day / month / year)   | ADDRESS OF WITNESS: Menachem Begin 9 Yehud.   |

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| FULL NAME OF INVENTOR:<br><b>SHPIGEL, Olga</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                         | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)            | ADDRESS OF WITNESS:   |

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|---|-----------------------|
| FULL NAME OF INVENTOR:<br><b>RONEN, David</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                        | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)           | ADDRESS OF WITNESS:   |

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|---|-----------------------|
| FULL NAME OF INVENTOR:<br><b>OFAN, Yeav</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                      | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)         | ADDRESS OF WITNESS:   |

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|--|-----------------------|
| FULL NAME OF INVENTOR:<br><b>ROSENCVEIG, Ben</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                           | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)              | ADDRESS OF WITNESS:   |

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|--|--|
| FULL NAME OF INVENTOR:<br><b>SHPIGEL, Olga</b> | FULL NAME OF WITNESS:<br><i>Haymou Rosen</i>         |
| SIGNATURE OF INVENTOR:<br><i>Shpigel</i>       | SIGNATURE OF WITNESS:<br><i>[Signature]</i>          |
| DATE: <u>21/11/21</u><br>(day / month / year)  | ADDRESS OF WITNESS:<br><i>Topaz 5 / 98 Beer Yaco</i> |

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|---|-----------------------|
| FULL NAME OF INVENTOR:<br><b>RONEN, David</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                        | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)           | ADDRESS OF WITNESS:   |





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Docket No.: P-591780-US

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|---|-----------------------|
| FULL NAME OF INVENTOR:<br><b>OFAN, Yoav</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                      | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)         | ADDRESS OF WITNESS:   |

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|--|-----------------------|
| FULL NAME OF INVENTOR:<br><b>ROSENCVEIG, Ben</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                           | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)              | ADDRESS OF WITNESS:   |

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| FULL NAME OF INVENTOR:<br><b>SHPIGEL, Olga</b> | FULL NAME OF WITNESS: |
| SIGNATURE OF INVENTOR:                         | SIGNATURE OF WITNESS: |
| DATE: _____<br>(day / month / year)            | ADDRESS OF WITNESS:   |

|   |   |
|---|---|
| FULL NAME OF INVENTOR:<br><b>RONEN, David</b>   | FULL NAME OF WITNESS:<br>ONLY EARLICH   |
| SIGNATURE OF INVENTOR:<br> | SIGNATURE OF WITNESS:<br> |
| DATE: <u>7/1/2021</u><br>(day / month / year)   | ADDRESS OF WITNESS:<br>GARIT 3, GIVATYM<br>ISRAEL   |