

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT6620464

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
RADIAN MEMORY SYSTEMS, LLC	03/27/2013
RECEIVING PARTY DATA	
Name:	RADIAN MEMORY SYSTEMS, INC.
Street Address:	26025 MUREAU RD.
City:	CALABASAS
State/Country:	CALIFORNIA
Postal Code:	91302
PROPERTY NUMBERS Total: 2	
Property Type	Number
Application Number:	17211508
Application Number:	17211482
CORRESPONDENCE DATA	
Fax Number:	(408)877-3828
<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:	4086556375
Email:	marc@schuylerlawgroup.com
Correspondent Name:	MARC SCHUYLER
Address Line 1:	PO BOX 2535
Address Line 4:	SARATOGA, CALIFORNIA 95070
ATTORNEY DOCKET NUMBER:	LLC
NAME OF SUBMITTER:	MARC P. SCHUYLER, REG. NO. 35675
SIGNATURE:	/Marc P. Schuyler/
DATE SIGNED:	03/24/2021
Total Attachments: 2	
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State of California
Secretary of State

CONV-1A

File# 201109810373

FILED
Secretary of State
State of California

MAR 27 2013

CERTIFICATE OF CONVERSION

IMPORTANT -- Read all instructions before completing this form.

This Space For Filing Use Only

CONVERTED ENTITY INFORMATION

1. NAME OF CONVERTED ENTITY Radian Memory Systems, Inc.			
2. FORM OF ENTITY corporation		3. JURISDICTION Delaware	
4. MAILING ADDRESS OF CHIEF EXECUTIVE OFFICE 5010 N. Parkway Calabasas Unit 205		CITY Calabasas	STATE ZIP CODE Ca. 91302
5. STREET ADDRESS OF CHIEF EXECUTIVE OFFICE		CITY	STATE ZIP CODE
6. STREET ADDRESS OF THE CALIFORNIA OFFICE, IF ANY		CITY	STATE ZIP CODE CA
7. MAILING ADDRESS OF AGENT FOR SERVICE OF PROCESS		CITY	STATE ZIP CODE

CONVERTING ENTITY INFORMATION

8. NAME OF CONVERTING ENTITY Radian Memory Systems, LLC		
9. FORM OF ENTITY limited liability company	10. JURISDICTION California	11. CA SECRETARY OF STATE FILE NUMBER, IF ANY 201109810373
12. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS: STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS 689,855 Class A Common Units Majority		

ADDITIONAL INFORMATION

13. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

14. 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.

March 27, 2013
DATE

M. Jador
SIGNATURE OF AUTHORIZED PERSON

Michael Jador, Manager
TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

SIGNATURE OF AUTHORIZED PERSON

TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON



I hereby certify that the foregoing
transcript of _____
is a full, true and correct copy of the
original record in the custody of the
California Secretary of State's office.

APR 26 2013

Date: _____ *es*

Debra Bowen
DEBRA BOWEN, Secretary of State

PATENT