

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

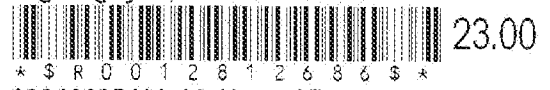
EPAS ID: PAT7685063

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
NEWPORT FAB, LLC DBA JAZZ SEMICONDUCTOR	05/12/2021
RECEIVING PARTY DATA	
Name:	NEWPORT FAB, LLC DBA TOWER SEMICONDUCTOR NEWPORT BEACH
Street Address:	4321 JAMBOREE RD.
City:	NEWPORT BEACH
State/Country:	CALIFORNIA
Postal Code:	92660
PROPERTY NUMBERS Total: 5	
Property Type	Number
Patent Number:	7745886
Patent Number:	9412758
Patent Number:	9245826
Patent Number:	9147609
Patent Number:	7772673
CORRESPONDENCE DATA	
Fax Number:	
<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>	
Email:	docketing@farjami.com
Correspondent Name:	FARJAMI & FARJAMI LLP
Address Line 1:	26522 LA ALAMEDA AVE
Address Line 2:	SUITE 360
Address Line 4:	MISSION VIEJO, CALIFORNIA 92691
ATTORNEY DOCKET NUMBER:	02SPE900G
NAME OF SUBMITTER:	EVAN C. GUNDERMAN
SIGNATURE:	/Evan C. Gunderman/
DATE SIGNED:	12/08/2022
Total Attachments: 1	
source=OC Registration of Change of Name to NEWPORT FAB, LLC DBA TOWER SEMICONDUCTOR	

MAIL FILED DOCUMENTS TO:

NAME NEWPORT FAB LLC
ADDRESS 4321 JAMBOREE ROAD
CITY/ST/ZIP NEWPORT BEACH, CA 92660

Filed in Orange County
Hugh Nguyen, Clerk-Recorder



20216605122 11:19 am 05/12/21

423 SC3A F01

23.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

WITH THE COUNTY CLERK-RECORDER
ON THE DATE INDICATED BY
FILESTAMP ABOVE

THESE FEES APPLY AT THE TIME OF FILING
(Provide a self-addressed, stamped envelope, if
mailed)

Filing fee \$23.00 for one business name
\$7.00 for each additional business name
\$7.00 for each additional partner after two



HUGH NGUYEN
CLERK - RECORDER
601 N. Ross Street
POST OFFICE BOX 238
Santa Ana, CA 92701

FICTITIOUS BUSINESS NAME STATEMENT

THE FOLLOWING PERSON(S) IS (ARE) DOING BUSINESS AS:

1.	FICTITIOUS BUSINESS NAME(S) TOWER SEMICONDUCTOR NEWPORT BEACH		BUSINESS PHONE NO. 949 239-3939 (Optional)	
1A.	<input checked="" type="checkbox"/> New Statement		<input type="checkbox"/> Refile <input type="checkbox"/> Change	
2.	STREET ADDRESS, CITY & STATE OF PRINCIPAL PLACE OF BUSINESS (DO NOT USE P.O. BOX OR P.M.B.) 4321 JAMBOREE ROAD	CITY NEWPORT BEACH	STATE CA	ZIP CODE 92660
3.	FULL NAME OF REGISTERED OWNER (IF CORPORATION, ENTER CORPORATION NAME) NEWPORT FAB LLC		If Corporation / LLC State of Incorporation or organization DE	
	RES. / CORP. ADDRESS (DO NOT USE A P.O. BOX OR P.M.B.) 4321 JAMBOREE ROAD	CITY NEWPORT BEACH	STATE CA	ZIP CODE 92660
	FULL NAME OF REGISTERED OWNER (IF CORPORATION, ENTER CORPORATION NAME)		If Corporation / LLC State of Incorporation or organization	
3.	RES. / CORP. ADDRESS (DO NOT USE A P.O. BOX OR P.M.B.)		CITY	STATE ZIP CODE
	FULL NAME OF REGISTERED OWNER (IF CORPORATION, ENTER CORPORATION NAME)		If Corporation / LLC State of Incorporation or organization	
	RES. / CORP. ADDRESS (DO NOT USE A P.O. BOX OR P.M.B.)		CITY	STATE ZIP CODE
3.	FULL NAME OF REGISTERED OWNER (IF CORPORATION, ENTER CORPORATION NAME)		If Corporation / LLC State of Incorporation or organization	
	RES. / CORP. ADDRESS (DO NOT USE A P.O. BOX OR P.M.B.)		CITY	STATE ZIP CODE
	FULL NAME OF REGISTERED OWNER (IF CORPORATION, ENTER CORPORATION NAME)		If Corporation / LLC State of Incorporation or organization	
4.	HAVE YOU STARTED DOING BUSINESS YET? <input checked="" type="checkbox"/> Yes Insert Date: 03/08/2002 <input type="checkbox"/> No		NOTICE - IN ACCORDANCE WITH SUBDIVISION (b) OF SECTION 17920, A FICTITIOUS 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).	
	5. THIS BUSINESS IS CONDUCTED BY: (Check One Only) <input type="checkbox"/> A Trust <input type="checkbox"/> A State Or Local Registered Domestic Partnership <input type="checkbox"/> An Individual <input type="checkbox"/> A Corporation <input type="checkbox"/> A General Partnership <input type="checkbox"/> A Limited Partnership <input type="checkbox"/> An Unincorporated Association <input type="checkbox"/> A Limited Liability Partnership <input type="checkbox"/> Copartners <input type="checkbox"/> A Married Couple <input type="checkbox"/> A Joint Venture <input checked="" type="checkbox"/> A Limited Liability Company			

I declare that all information in this statement is true and correct.

(A registrant who declares as true any material matter pursuant to Section 17913 of the Business and Professions Code that the registrant knows to be false is guilty of a misdemeanor punishable by a fine not to exceed one thousand dollars (\$1,000).)

REGISTRANT(S) NAME NEWPORT FAB LLC DALE BOGAN MANAGING MEMBER / MANAGER
(Type or Print Name) Print Name and Title of Office/Manager or General Partner

REGISTRANT(S) SIGNATURE *Dale Bogan*

If corporation, also print corporate title of officer. If LLC, also print title of officer or manager.