FORM P10-1594	U.S. DEPARTMENT OF
	ORM COVER SHEET United States Patent and Trademark Office
OMB No. 0651-0027 (exp. 06/30/2008) TRADEMA	RKS ONLY
To the Director of the U.S. Patent and Trademark Office	: Please record the attached documents or the new address(es) balow.
Name of conveying party(lea):     Silicon Valley Bank     Silicon Valley Bank	2. Name and address of receiving party(les): Additional name(s) of conveying parties attached? ☐Yes ☒ No
3003 Tasman Drive Santa Clara, CA 95054	Name: ID Analytics, Inc.
	Internal Address:
☐ Individual(s) ☐ Association	
☐ General Partnership ☐ Limited Partnership	Street Address: 15253 Avenue of Science
☑ Corporation-State: CA	
☐ Other	City: San Diego State: CA
Additional name(s) of conveying parties attached? ☐Yes ☒ No	Country: USA
3. Nature of conveyance/ Execution Date(s):	Zip: 92128
Execution Date(s): March 12, 2012	Association Citizenship
☐ Assignment ☐Merger	☐ General Partnership Citizenship ☐ Limited Partnership Citizenship ☐ Corporation Citizenship
Security Agreement Change of Name	Corporation Citizenship : United States, California  Other Citizenship  If assignee is not domiciled in the United States, a domestic representati
<b>53</b>	designation is attached: 🔲 Yes 🔀 No
	(Designations must be a separate document from assignment) fication or description of the Trademark:
**	•
A. Trademark Application No.(6)	B. Trademark Registration No.(s)
77197556	3717185 4016227 3680614 2928750
77347236	4096443 4016228 3680615 3199871
	4096444 4002719 2916055 3234579
	4016226 3680613 2918269 3230852
C. Identification or Description of Trademark(s) (and Filing Da Registration Number is unknown):	te if Application or Additional sheets attached? Yes N
5. Name and address of party to whom	6. Total number of applications and
correspondence	registrations involved: 18
concerning document should be mailed:	
Name: UCC Direct Services	
Internal Address: Attn: 14080632	7. Total fee (37 CFR 2.6 (b)(6) & 3.41): \$ 465.00 Authorized to be charged by credit card
Street Address: 187 Wolf Road, Suite 101	Authorized to be charged to deposit account Enclosed
City: Albany State: NY ZiP: 12295	8. Payment Information:
Phone Number: 1-800-342-3676 X 4065	a. Credit Card Last 4 Numbers 1640
Fax Number: <b>1-800-962-7049</b>	Expiration Date /0/13
Email Address; cls-udsatbany@wolterskluwer.com	b. Deposit Account Number Authorized User Name
9. Signature.	- 3/12/12
Joseph D Borgman	Date
V_T_ON	Total number of pages including cover

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria VA 22313-1450 TRADEMARK

REEL: 004735 FRAME: 0709

## RELEASE OF SECURITY AGREEMENT COVERING INTERESTS IN TRADEMARKS

Silicon Valley Bank ("Secured Party"), hereby releases its security interest in the interests of ID Analytics, Inc. ("Assignor") in the trademarked works set forth in that certain Intellectual Property Security Agreement dated, 10/21/2005, executed by Assignor in favor of Secured Party recorded with the United States Department of Commerce, Patent and Trademark Office on 12/22/2008, Reel 3907, Frame 0939.

Dated: March 12, 2012

SILICON VALLEY BANK

Name: Romil Randhawa
Title: Ops Manager

TRADEMARK REEL: 004735 FRAME: 0710

**RECORDED: 03/12/2012**