### TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

ETAS ID: TM596048

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	Termination of Security Interest

#### **CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
DUCHOSSOIS TECHNOLOGY PARTNERS, L.L.C.		06/02/2003	Limited Liability Company: UNKNOWN
OPEN PRAIRIE VENTURES I, L.P.		06/02/2003	Limited Partnership: UNKNOWN
CHESS VENTURES, LLC		06/02/2003	Limited Liability Company: UNKNOWN

### **RECEIVING PARTY DATA**

Name:	INFOBLOX INC.
Street Address:	475 POTERO AVENUE
City:	SUNNYVALE
State/Country:	CALIFORNIA
Postal Code:	94085
Entity Type:	Corporation: ILLINOIS

### **PROPERTY NUMBERS Total: 4**

Property Type	Number	Word Mark
Registration Number:	2546208	INFOBLOX
Serial Number:	76277733	DNS ONE: A HIGHER STATE OF DNS/DHCP
Serial Number:	76277734	A HIGHER STATE OF DNS/DHCP
Serial Number:	76277735	A HIGHER STATE

#### CORRESPONDENCE DATA

Fax Number: 2124464900

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.

susan.zablocki@kirkland.com Email:

SUSAN ZABLOCKI **Correspondent Name:** Address Line 1: Kirkland & Ellis LLP Address Line 2: 601 Lexington Avenue

Address Line 4: New York, NEW YORK 10022

ATTORNEY DOCKET NUMBER:	26879-12
NAME OF SUBMITTER:	Susan Zablocki

SIGNATURE:	/susan zablocki/			
DATE SIGNED:	09/04/2020			
Total Attachments: 5				
source=Terminations of Security Interests (3)#page1.tif				
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7c. MAILING ADDRESS

7d TAX ID #: SSN OR EIN

## UCC FINANCING STATEMENT AMENDMENT

RECEIVED SECRETARY OF STATE UNIFORM COMM. CODE DIV.

2003 HIN -2 AM IO: 20

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NONE

FOLLOW INSTRUCTIONS (front and back) CAREFULLY	2003 .ii	N-2 AM I	l: 20	
A. NAME & PHONE OF CONTACT AT FILER [optional] PATRICK J. BRUKS		A C AIFE	J. C.J	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)  BURKE, WARREN, MACKAY & SERRITELLA, P.G. 330 N. WABASH AVE. 22ND FLOOR CHICAGO, IL 60611	C.		0.0	i/03:09:8816: O CkOO 18 1131109
L	THE	AROVE SPACE IS	FOR FILING OFFIC	E USE ONLY
1a. INITIAL FINANCING STATEMENT FILE #		1b.	THE FINANCING STAT	EMENT AMENDMENT IS
004616715 FILED ON JANUARY 17, 2002 WITH THE ILL	NOIS SECRETARY OF STA	пЕ П	o be filed [for record] ( REAL ESTATE RECO	
2. X TERMINATION: Effectiveness of the Financing Statement Identified above			Party authorizing this T	ermination Statement.
<ol> <li>CONTINUATION: Effectiveness of the Financing Statement identified at continued for the additional period provided by applicable law.</li> </ol>				etion Statement is
4. ASSIGNMENT (full or pertial): Give name of assignee in item 7s or 7b and			J.,	
<ol> <li>AMENDMENT (PARTY INFORMATION): This Amendment affects Do Also check one of the following three boxes and provide appropriate information in</li> </ol>	ebtor of Secured Party of record.	Check only <u>one</u> of the	se two boxes.	
CHANGE name and/or eddress: Give current record name in item 6a or 6b; a name (if name change) in item 7a or 7b and/or new address (if address change)	teo alve new TI DELETE neme: Gh		ADD name: Complete Item 7c; also complete	item 7s or 7b, and also items 7d-7g (If applicable).
6. CURRENT RECORD INFORMATION:  [6s. ORGANIZATION'S NAME				
INFOBLOX INC.				
OR SO, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDI	E NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:	<u> </u>			
76. ORGANIZATION'S NAME				
OR THE MINISTRALIS I AST MANE	IEIDST DAME	MIDD	E NAME	SUFFIX

71. JURISDICTION OF ORGANIZATION

**TERMINATED** 

STATE POSTAL CODE

7g. ORGANIZATIONAL ID #, if any

<b>9</b> . į	NAME OF SECURED PARTY OF RECORD AUTHORIZING T adds collateral or adds the authorizing Debtor, or if this is a Termination a	HIS AMENDMENT (name of assignor, if the authorized by a Debtor, check here and and a	his is an Assignment). If this is an Amendment out inter name of DEBTOR authorizing this Amendme	horized by a Debtor which ant.
	98. ORGANIZATION'S NAME OPEN PRAIRIE VENTURES   LP			
OR	96, INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	OPTIONAL FILER REFERENCE DATA TILE WITH THE ILLINOIS SECRETARY OF STATI	3		

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

ADD'L INFO RE 76. TYPE OF ORGANIZATION ORGANIZATION DEBTOR

Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

8. AMENDMENT (COLLATERAL CHANGE): check only one box.

**TRADEMARK** 

**REEL: 007045 FRAME: 0589** 



RECEIVED SECRETARY OF STATE UNIFORM COMM. CODE DIV.

# UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY 2003 JUN -2 AM 10: 29

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
PATRICK J. BRUKS

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

BURKE, WARREN, MACKAY & SERRITELLA, P.C.
330 N. WABASH AVE.
22ND FLOOR
CHICAGO, IL 60611

UCU106/03/03:09:8815: 0.00 CK00 SOSIL 14:18 1131095 TM

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FILE # to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. 005775590 FILED ON AUGUST 29, 2002 WITH THE ILLINOIS SECRETARY OF STATE 2. X TERMINATION: Effectiveness of the Financing Statement Identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation State continued for the additional period provided by applicable law. 4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assigner in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor og Secured Party of record. Check only pag of these two boxes. Also check one of the following three boxes and provide appropriate information in Items 6 and/or 7. DELETE name: Give record name to be deleted in item 6a or 6b. CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable). 6. CURRENT RECORD INFORMATION: 8a. ORGANIZATION'S NAME INFOBLOX INC. OR 66. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR SUFFIX 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME COUNTRY STATE POSTAL CODE 7c. MAILING ADDRESS ď 7d. TAX ID #: SSN OR EIN 71. JURISDICTION OF ORGANIZATION 7g. DRGANIZATIONAL ID #, if any ADD'L INFO RE | 7e. TYPE OF ORGANIZATION ORGANIZATION NONE DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only goe box.

TERMINATED

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Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.



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FILE WITH THE ILLINOIS SECRETARY OF STATE



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TERMINATION: EF	ectiveness of the Financing St	stement identified above is te	erminated with respect t	o security interest(s) of the	Secured F	arty authorizing this Termin	ation Statement.
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ASSIGNMENT (NIII (	or partial): Give name of assig	nee in item 7s or 7b and add	lress of assignee in Iter	7c; and also give name o	f assignor	in Item 9.	
•	INFORMATION): This An			ty of record. Check only g		****	
	ving three boxes <u>and</u> provide a				. —	ADD 0	947k4-k-
	address: Give current record r in item 7s or 7b and/or new so	name in item 6a or 60; also gi ddress (if address change) in	item 7c. DELE	TE name: Give record name leleted in item 6a or 6b.	<u>"    </u>	ADD name: Complete item tem 7c; also complete item:	7d-7g (If applicable)
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В.	SEND ACKNOWLEDGMENT TO: (Name and Address)		!				
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	MACHINATION FOR THE STATE OF TH				III REA	L ESTATE RECORDS.	•
3.	X TERMINATION: Effectiveness of the Financing Statement Identified above is						
٠. ا	CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	re with respect to see	curity interest(s) of	f the Secur	ed Party autho	rizing this Continuation St	stement is
4.	ASSIGNMENT (full or partial): Give name of assignee in Item 7s or 7b and a	ddress of sssignee in	item 7c; and also	give name	of assignor in i	item 9.	
5.	AMENDMENT (PARTY INFORMATION): This Amendment affects   Deb		Party of record. (				
	Also check one of the following three boxes and provide appropriate information in its	erns 6 and/or 7.	·	•			
	CHANGE name and/or address: Give current record name in item 8a or 6b; also name [If name change] in item 7a or 7b and/or new address (if address change)	give new Di	ELETE name; Given be deleted in item	e record na 6a or 6b.	me AD	D name: Complete item 7s n 7c; also complete items 7	or 7b, and also d-7c (if applicable)
6.	CURRENT RECORD INFORMATION:  [88] ORGANIZATION'S NAME						
	INFOBLOX INC.						
OR	· · · · · · · · · · · · · · · · · · ·	FIRST NAME	· · · · · · · · · · · · · · · · · · ·		MIDDLE	IAME -	la con
	·	110111			MIDDLE I	PUME.	SUFFIX
7.	CHANGED (NEW) OR ADDED INFORMATION:	<u> </u>	<del></del>		<del></del>	<del>'''''''-</del>	
	7a. ORGANIZATION'S NAME			-			<del></del>
OR							
	75. INDIVIDUAL'S LAST NAME	FIRST NAME		_	MIDDLE	AME	SUFFIX
7c	MAILING ADDRESS						
	muling Audress	atv			STATE	POSTAL CODE	COUNTRY
7d.	TAX ID II: SSN OR EIN ADD'L INFO RE TO TYPE OF ORGANIZATION	71. JURISDICTION	OF ORGANIZATIO	)N	7g ORGA	NIZATIONAL ID #. if any	
	ORGANIZATION ' DEBTOR				<b>J</b> . 57. G.	THE THOUSE IN S. S. AL	$\Box$
8. /	MENDMENT (COLLATERAL CHANGE): check only one box.	L		•			NONE
	escribe collateral deleted or added, or give entire restated collateral	description, or desc	ribe collateral	assigned.			
			_				
					700	RMINATED	•
					ıÇ	(1(1)14)11.42	
						•	
9. N	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEN	IDMENT (name of a	ssignor, if this is a	n Assignme	nQ. If this is a	Amendment authorized by	a Debtor which
-	rus consists of social the authorizing Debtor, or a this is a Termination authorized by	a Debtor, check here	and enter na	me of DEE	TOR authoriz	ing this Amendment.	mager
	98. ORGANIZATION'S NAME CHESS VENTURES, LLC						
OR	The International Activities	EIDET WALE			Tripper		-
- 1		FIRST NAME			MIDDLE N	WE	SUFFIX

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**TRADEMARK REEL: 007045 FRAME: 0593** 

**RECORDED: 09/04/2020** 

FILE WITH THE ILLINOIS SECRETARY OF STATE

10. OPTIONAL FILER REFERENCE DATA