

## POWER OF ATTORNEY BY APPLICANT

I hereby revoke all previous powers of attorney given in the application identified in either the attached transmittal letter or the boxes below.

Application Number	Filing Date

(Note: The boxes above may be left blank if information is provided on form PTO/AIA/82A.)

I hereby appoint the Patent Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s), and to transact all business in the United States Patent and Trademark Office connected therewith for the application referenced in the attached transmittal letter (form PTO/AIA/82A) or identified above:

OR

108547

I hereby appoint Practitioner(s) named in the attached list (form PTO/AIA/82C) as my/our attorney(s) or agent(s), and to transact all business in the United States Patent and Trademark Office connected therewith for the patent application referenced in the attached transmittal letter (form PTO/AIA/82A) or identified above. (Note: Complete form PTO/AIA/82C.)

Please recognize or change the correspondence address for the application identified in the attached transmittal letter or the boxes above to:

The address associated with the above-mentioned Customer Number

OR

The address associated with Customer Number:

OR

Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		

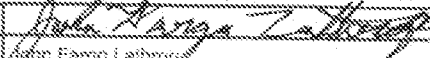
I am the Applicant (if the Applicant is a juristic entity, list the Applicant name in the box):

New Resonance, LLC

- Inventor or Joint Inventor (title not required below)
- Legal Representative of a Deceased or Legally Incapacitated Inventor (title not required below)
- Assignee or Person to Whom the Inventor is Under an Obligation to Assign (provide signer's title if applicant is a juristic entity)
- Person Who Otherwise Shows Sufficient Proprietary Interest (e.g., a petition under 37 CFR 1.46(b)(2) was granted in the application or is concurrently being filed with this document) (provide signer's title if applicant is a juristic entity)

### SIGNATURE of Applicant for Patent

The undersigned (whose title is supplied below) is authorized to act on behalf of the applicant (e.g., where the applicant is a juristic entity).

Signature 	Date (Optional)   12/19/17
Name John Fargo Lathrop	
Title Director, New Resonance, LLC	

**NOTE:** Signature - This form must be signed by the applicant in accordance with 37 CFR 1.33. See 37 CFR 1.4 for signature requirements and certifications. If more than one applicant, use multiple forms.

Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.101, 1.32, and 1.33. The information is required to obtain or retain a benefit by the public which it is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

*If you need assistance in completing the form, call 1-800-PTO-8199 and select option 2.*

# PCT

## GENERAL POWER OF ATTORNEY

(for several international applications filed under the Patent Cooperation Treaty)

(PCT Rule 90.5)

The undersigned person(s):

(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

LATHROP, John Fargo  
New Resonance, LLC  
1905 Milano Way  
Mountain View, California 94040

I hereby appoint(s) the following person as:

agent

common representative

Name and address:

(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

Bone, Richard G. A.; Mohr, Judy M.; Li, Wen; Mahoney, Jacqueline F.;

Customer No. 108547

McDermott Will & Emery LLP  
500 North Capitol Street N.W.  
Washington, D.C. 20001  
USA

to represent the undersigned before:

all the competent International Authorities

the International Searching Authority only

the Authority specified for supplementary search only. \_\_\_\_\_  
(please indicate the Authority(ies) specified for supplementary search)

the International Preliminary Examining Authority only

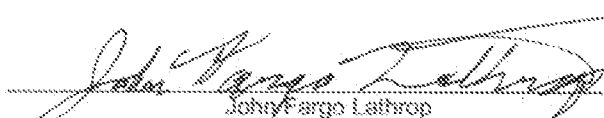
in connection with any and all international applications filed by the undersigned with the following Office:

United States Patent and Trademark Office

as receiving Office

and to make or receive payments on behalf of the undersigned.

Signature(s) (where there are several persons, each of them must sign; next to each signature, indicate the name of the person signing and the capacity in which the person signs, if such capacity is not obvious from reading this power):

  
John Fargo Lathrop  
Director, New Resonance, LLC

Date:

12/15/17