Dear Fellow Adopter,

This letter ("Amendment Letter") is to inform you that the Wireless USB Promoters have voted to adopt an addendum to the "Wireless USB Specification Version 1.1". (the "Specification Supplement"). A copy of the Specification Supplement is located at: www.usb.org. This letter is also to provide you the option of extending your Wireless USB Adopter Agreement to address this new Specification Supplement.

Please note that the Specification Supplement exceeds the scope of the Wireless USB Adopters Agreement (which is specific to the Wireless USB Specification). Adopters may amend their Adopter Agreement to expand the scope of their already executed Adopters Agreement by signing and returning this Amendment Letter to the address below.

Upon receipt by the Secretary of a fully executed original of this Amendment Letter with the signature of your authorized representative below, the Adopter identified in this Amendment Letter agrees that its Wireless USB Adopter Agreement is hereby modified as follows:

1) All terms and conditions of the Wireless USB Adopter Agreement remain in full force and effect and apply to this Amendment Letter, unless specifically modified below.

2) The Promoters and their Affiliates hereby agree to grant to the Adopter identified in this Amendment Letter and its Affiliates, license rights to the Specification Supplement to the same extent as license rights granted to the Final Specification under Section 2 of the Adopter Agreement.

3) The Adopter and its Affiliates hereby agree to grant to the Promoters (and their Affiliates) as well as any other Adopting Party that executes a substantially equivalent counterpart to this Amendment Letter (and its Affiliates), license rights to the Specification Supplement to the same extent as license rights granted to the Final Specification under Section 2.1(b) of the Adopter Agreement.

Sincerely,

Jeff Ravencraft
Wireless USB Promoter Group
Chairman and Secretary

Adopter: _______________________________
(Company Name)

By: _______________________________
Authorized Representative

Name: _______________________________

Date: _______________________________