

UNITED STATES DISTRICT COURT

for the

Eastern District of Texas

NETWORK-1 SECURITY SOLUTIONS, INC.

Plaintiff

v.

Alcatel-Lucent Holdings Inc. et.al.

Defendant

Civil Action No. 6:11cv492

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) AXIS Communications, Inc.

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

T. John Ward, Jr.
Ward & Smith Law Firm
P.O. Box 1231
Longview, Texas 75606
(903) 757-6400

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 12/9/11



CLERK OF COURT

David Malen

Signature of Clerk or Deputy Clerk

Civil Action No. 6:11cv492

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (f))

This summons for *(name of individual and title, if any)* AXIS Communications, Inc.
was received by me on *(date)* 12/14/2011

I personally served the summons on the individual at *(place)* _____
on *(date)* _____ ; or

I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
on *(date)* _____ ; or

I returned the summons unexecuted because _____ ; or

Other *(specify)*: Certified Mail, Return Receipt Requested 7011 0470 0000 8756 6437

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00

I declare under penalty of perjury that this information is true.

Date: 1/4/12 _____ re A Kiser

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

AXIS COMMUNICATIONS, INC.
C/O FREDRIK NILSSON
100 APOLLO DR
CHELMSFORD, MA 01824-3605

2. Article *(Trans)* 7011 0470 0000 8756 6437

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ title A Kiser
 Agent
 Addressee

B. Received by *(Printed Name)* _____ C. Date of Delivery _____

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? *(Extra Fee)* Yes

111 W Tyler St
Longview, TX 75601