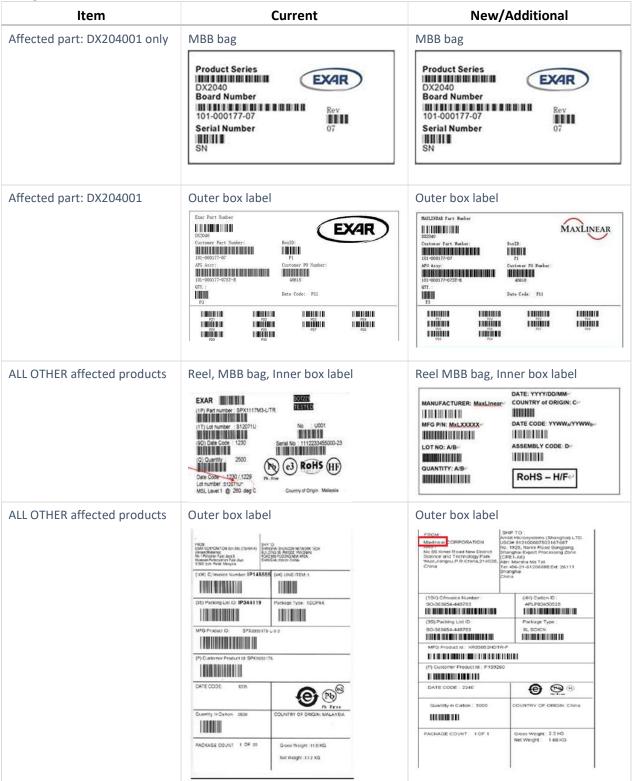


PROCESS CHANGE NOTICE (PCN)							
PCN Number:	PCN-2301	PCN-23011		Means of distinguishing changed devices:			
Date Issued:	June 1, 20	June 1, 2023		Product Mark:			
Date Effective:	June 1, 20	June 1, 2023		Back Mark			
Date Issued (+90 days): August 3		, 2023	Date Code				
,	, ,	g ,		No change to device			
				0			
			Atta	chment: Yes 🗆	No ⊠		
Product(s) Affected: Exar Legacy MaxLinear HPA Products							
EXAR Legacy product		Part number prefix LP, SP, SPX, XR, XRA, XRP, XRT, ST, VRC					
		Products: 9240CB-F, DX204001					
	MXL HPA products		Part number prefix: New MXL products				
		Products (existin		·			
		MXL7218-ABA-	-T	MXL7225-1-ABA-T			
		MXL7225-ABA-	-T	MXL76125-AQB-R			
		MXL7630		MXL7704-BQB-T			
		MXL83947-AQI	B-R	MXL8908A1			
Description of Cha	ange:						
In 2023, MaxLinear will be converting all shipping labels for the parts noted from an EXAR format to MaxLinear's label. During this transition customers may receive either label.							
This change affects only shipping and packing labels. This change will not affect the part number, part marking, manufacturing process or manufacturing sites.							
sales, distributor, a shipments with bo eventually cleared will be exhausted.	ess material will be co and such, will not be co th Exar and MaxLinea out. Situation is proc	onverted. Hence r labels for some duct to product v	ce, cust e perio	omers may experied until existing inve	ence receiving ntory of old la	mixed abels is	
No change to prod	uct form, fit, function	and reliability.					
Purpose of Change	e:						
Standardize MaxLinear shipping labels.							



Change Details:





Reliability/Qualification Summary:					
<not applicable=""></not>					
Samples and Support					
Contact our Customer Support team by creating a sup http://www.maxlinear.com/support/createcase	port ticket at				
Phone: 1-760-692-0711					
Customers are advised to acknowledge receipt of thi notice. Lack of acknowledgement within 30 days con further action. Please email this form to the contact above after contact above.	stitutes acceptance of this change without				
Customer:	_				
Name:	_				
Title:	_				
Date:	_				
E-Mail:					
Phone:					
Fax:					
Approval for shipments prior to effective date					
Customer Comments (Optional):					