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To the Honorable Commissioner of F



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attached original documents or copy thereof

1. Name of conveying party(ies):

Josman Laboratories, Inc.

MRD

1-25-99

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

2. Name and address of receiving party(ies)

Name: Creative Technologies, Inc./Woodward
Partners, LLC

Internal Address: _____

Street Address: 465 West Saddle River RoadCity: Upper Saddle River State: NJ ZIP: 07451Additional name(s) & address(es) attached? ☐ Yes ☒ No

3. Nature of conveyance:

☐ Assignment☐ Merger☒ Security Agreement☐ Change of Name☐ Other _____Execution Date: 10-7-99

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: _____

A. Patent Application No.(s)

B. Patent No.(s) 5,834,002Additional numbers attached? ☐ Yes ☐ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Klika, Liao, Parrish & Cochran

Internal Address: _____

Street Address: 301 E. Colorado Blvd. #501City: Pasadena State: CA ZIP: 911016. Total number of application and patents involved: 17. Total fee (37 CFR 3.41).....\$ 40 - paid☐ Enclosed☐ Authorized to be charged to deposit account

8. Deposit account number

(Attach duplicate copy of this page if paying by deposit account)

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9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and a y attached copy is a true copy of the original document.

Peter Klika, Esq.
Name of Person SigningPeter Klika
SignatureApril 28, 1999
DateTotal number of pages including cover sheet, attachments, and document: 1Mail documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231PATENT
REEL: 9719 FRAME: 0774

This **FINANCING STATEMENT** is presented for filing and will remain effective, with certain exceptions, for five years from the date of filing, pursuant to Section 9403 of the California Uniform Commercial Code.

1. DEBTOR (LAST NAME FIRST—IF AN INDIVIDUAL) Josman Laboratories, Inc.		1A. SOCIAL SECURITY OR FEDERAL TAX NO.	
1B. MAILING ADDRESS 318 W. Katella Ave. Suite 6B		1C. CITY, STATE Orange, CA	1D. ZIP CODE 92667
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST—IF AN INDIVIDUAL)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	2D. ZIP CODE
3. DEBTOR'S TRADE NAMES OR STYLES (IF ANY) Josman Laboratories		3A. FEDERAL TAX NUMBER	
4. SECURED PARTY NAME Creative Technologies, Inc.; Woodward Partners, L.L.C. MAILING ADDRESS 1000 D Lake Street CITY Ramsey STATE NJ ZIP CODE 07446		4A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		5A. SOCIAL SECURITY NO., FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
6. This FINANCING STATEMENT covers the following types or items of property (include description of real property on which located and owner of record when required by instruction 4).			

See Exhibit "A" attached hereto and incorporated herein by this reference.

7. CHECK IF APPLICABLE <input checked="" type="checkbox"/>	7A. <input checked="" type="checkbox"/> PRODUCTS OF COLLATERAL ARE ALSO COVERED	7B. DEBTOR(S) SIGNATURE NOT REQUIRED IN ACCORDANCE WITH INSTRUCTION 5(b) ITEM: <input type="checkbox"/> (1) <input type="checkbox"/> (2) <input type="checkbox"/> (3) <input type="checkbox"/> (4)
8. CHECK IF APPLICABLE <input checked="" type="checkbox"/>	<input type="checkbox"/> DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH UCC § 9105 (1) (B)	
9. SIGNATURE(S) OF DEBTOR(S) Josman Laboratories, Inc. TYPE OR PRINT NAME(S) OF DEBTOR(S) DATE: 10/7/1997		10. THIS SPACE FOR USE OF FILING OFFICER (DATE, TIME, FILE NUMBER AND FILING OFFICER) 9811460804 FILED SACRAMENTO, CA APR 24, 1998 AT 0800 BILL JONES SECRETARY OF STATE PATENT
SIGNATURE(S) OF SECURED PARTY(IES) TYPE OR PRINT NAME(S) OF SECURED PARTY(IES)		
11. Return copy to: NAME Klika, Liao, Parrish & Cochran ADDRESS 301 E. Colorado Blvd. #501 CITY Pasadena, CA 91101 STATE ZIP CODE		
Filing Officer is requested to note file number, date and hour of filing on this copy and return to the above party.		

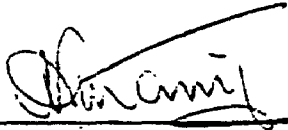
(2) FILING OFFICER COPY - ACKNOWLEDGMENT FOR UCC

REEL: 9719 FRAME: 0778

EXHIBIT "A" to UCC-1 FINANCING STATEMENT

All of Debtor's rights, titles, and interest in and to the following:

1. All furnishings, fixtures, equipment and all renewals and replacements thereof;
2. All accounts receivable, all license and royalty payments, and all other income of any nature whatsoever;
3. All personal property (tangible and intangible) including but not limited to the following patent rights: 8282/6, 13, 14, 15, 16 ~~17~~.
4. All other assets of Debtor.



TO BE ATTACHED TO UCC-1