02-10-1	999 · 194P0281-P0099-P0379				
Tab settings 2 2 C Y Y	W W W W Y Y				
Tale senage 2.20 Y Y To the Honorable Commissioner of Pate ###################################	ed original documents or copy thereof.				
1. Name of conveying party(ics): 1009632					
Diane Conti, Personal Representative of the Estate of Kendall Preston, Jr	Name: Diane Conti				
Additional name(s) of conveying partytics) attached. yes X no	Internal Address:				
3. Nature of Conveyance: 3-4-99					
XXAssignment Merger	Street Address: 17223 Palisades Circle				
Security Agreement Change of Name	Silet Addiess. 17225 Tallbades Girele				
	Cuy Pacific Pathisades, CA 71r 90272				
LJOther					
Execution Date: 1-27-99	Additional name(s) & address(es) attached? Yes XN0				
4 Application number(s) or patent number(s): 4,777,525					
If this document is being filed together with a new application,					
A. Patent Application No.(s)	B. Patent No.(s)				
Additional numbers	attached? Yes XXNo				
5. Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved: 3				
Name: Harry M. Weiss & Associates, F	. C.				
Internal Address:	7. Total fee (37 CFR 3.41):				
	XXEnclosed				
	Authorized to be changed to deposit account				
Street Address: 4204 N. Brown Avenue	3. Deposit account number:				
City: Scottsdale State: AZ ZIP85251	(Attach duplicate copy of this page if paying by deposit account)				
DO NOT USE	TINS SPACE				
	1305				
9. Statement and signature.					
To the best of my knowledge and belief, the foregoing informe of the original document.	ition is true and correct and ony attached copy is a true copy				
Jeffrey D. Moy	reg D. Mos 2-1-99				
Name of Person Signing	Signature Date				
	Total number of pages comprising cover sheet 3				
OMB No. 0651 0011 (csp. 4/94)					
08/1999 JSHABAZZ 00000081 4777525 Do not detact	·				
FC:581 ail documents to be recon 1895 Will required cover sheet info	emation to:				
Commissioner of Pat Box A si Washington	gaments				
Public builden reporting for this sample cover she document to be recorded, including time for reviewing and completing and reviewing the sample cover shee to the U.S. Parent and Trademark Office, Office of D.C. 2013, and to the Office of Management and Busty Management and Busty Management.	neet is estimated to average about 30 immures per ng the document and gathering the data needed, t. Send comments regarding this burden estimate information. Systems, PK2-1000C, Washington,				

ASSIGNMENT AGREEMENT

For good and valuable consideration, the receipt of which is hereby acknowledged, I, Diane Conti, in my capacity as the Personal Representative of the estate of Kendall Preston, Jr. and as his surviving spouse, have sold, assigned and transferred and do hereby sell, assign and transfer unto Diane Conti, and her successors, assigns and legal representatives, the entire right, title and interest for the United States of America in and to certain inventions relating to: (a) United States Patent No. 4,777,525, entitled "APPARATUS AND METHOD FOR A MULTI-RESOLUTION ELECTRO-OPTICAL IMAGING, DISPLAY AND STORAGE/RETRIEVAL SYSTEM", issued October 11, 1988, and upon any division, extension, continuation or reissue thereof; (b) United States Patent No. 4,667,295, entitled "LOGICAL TRANSFORM IMAGE PROCESSOR", issued May 19, 1987, and upon any division, extension, continuation or reissue thereof; and (c) United States Patent No. 4,641,351, entitled "LOGICAL TRANSFORM IMAGE PROCESSOR", issued February 3, 1987, and upon any division, extension, continuation or reissue thereof. Attached hereto and incorporated herein by reference are a certified copy of the Certificate of Death of Kendall Preston, Jr. and a file-stamped copy of Letters of Personal Representative and Acceptance, evidencing the appointment of Diane Conti as Personal Representative of the Estate of Kendall Preston, Jr. without restriction -- which documents establish the authority for this assignment.

I also hereby sell, assign and transfer unto the said Diane Conti, the entire right, title and interest in and to said

PATENT REEL: 9737 FRAME: 0832 invention and in and to applications for Letters Patent therefor in all countries foreign to the United States of America, including all rights under any and all international conventions and treaties in respect of said inventions and said applications for Letters Patent in foreign countries.

I hereby authorize and request the Assistant Commissioner of Patents of the United States of America to issue Letters Patent upon any division, extension, continuation or reissue of the aforesaid United States patent, to Diane Conti, for the sole use and behoof of said Diane Conti, her successors, assigns and legal representatives, to the full end of the term for which said Letters Patent may be granted, the same as they would have been held and enjoyed by Kendall Preston, Jr. had this assignment not been made, and I hereby authorize and request the equivalent authorities in foreign countries to issue the patents of their respective countries to the said Diane Conti.

Dated: Van 27, 1999

Diane Conti, Personal Representative of the Estate of Kendall Preston, Jr.

PATENT REEL: 9737 FRAME: 0833

97_{0C7} -8 All 9:47

SUPERIOR COURT OF ARIZONA, PIMA COUNT In the Matter of the Estate of LETTERS OF PERSO KENDALL PRESTON, JR. REPRESENTATIVE AND ACCEPTANCE Deceased (Testate Estate) ISSUANCE OF LETTERS DIANE CONTI is hereby appointed as Personal Representative of this Estate without restriction except for the following: No Restrictions DESCO IL CORRETT WITNESS: Clerk of the Superior Court ACCEPTANCE I hereby accept the duties of Personal Representative of the Estate of the above-named decedent and do solemnly swear that I will perform, according to law, the duties of such fiduciary. day of DATED this 3 DIANE CONTI Name: 17223 Palisades Circle Address: Pacific Palisades, CA 90272 STATE OF ARIZONA)) ss. COUNTY OF PIMA SUBSCRIBED AND SWORN TO before me on this 30 day of 1997, by DIANE CONTI. My Commission Expires: -14-2000

Attorney's Signature

Attorney's Name, Address, Phone

John N. Helenbolt

Duffield, Young, Adamson and Alfred, P.C.

177 N. Church, #711, Tucson, AZ 85701-1181

520/792-1181

Computer No. 24976

(1/90) PB-107

PATENT REEL: 9737 FRAME: 0834



STATE OF ARIZONA

STATE OF ARIZONA

DEPARTMENT OF HEALTH SERVICES - OFFICE OF VITAL RECORDS DEATH NO. CERTIFICATE OF DEATH

				15.4	E OF MO	NTH DAY	YEAR	
NAME OF A. FIRST KENDALL	B. MIDDLE	PRESTON	2.	MALE	TH AUGUS	T 13, 199	97	
RACE (e.g., white, black, American Indian, [spec SPECIFY: WHITE	City Inbe] etc.) WAS DECEDENT OF HISPANIC (SPECIFY YES OF NO)	ORIGIN:	IF YES, INDICATE MEXICAN, SPANISH, PUERTO RICAN, WAS DE CUBAN, ETC. C. SAME SPANISH, PUERTO RICAN, WAS DE CAPECIFO.			ECEASED EVER IN U.S. ARMED FORCES? FY YES OR NO) YES		
PLACE OF A. COUNTY DEATH PIMA 6.	B. TOWN OR CITY TUCSON		C.HOSPITALOR (IF RESIDENCE, GIVE STREET ADDRINGTITUTION MANOR CARE NURSING HOME			D. DOA OPEMER. NIN PATIENT		
	YEAR AGE (YEARS IF UNDER 1 MOS. D	YEAR IF UNDER 1 DAY HRS. MIN.	MARRIED, NEVER MARRIED, SURVIVING SPOUSE MARRIED DIA			NF WIFE, GIVE MAIDEN NAME) ANE KAYE HUSO		
STATE AND (If not in USA, name country OF BUSTON, MA		1	RITY NO. -26-8180	USUAL OCCUPATION (Grade done most of working life, e ENGIN)	uen d retired)	ELECTRO		
	PIMA C. TOWN O	SON	D. ZIP CODE 85712	HOW LONG IN ARIZONA? 16. 25 YEARS	H 17.	EDUCATION IGHEST GRADE COMP	PLETED	
STREET ADDRESS OR R.F.D. 3180 HILL FARM	DR (SPECIFY Yes OF NO)	N RESERVATION SPECIFY Yes of No) 5G.	PREVIOUS STATE OF RESIDENCE PENNS	/LVANIA	ELEMENTARY-5 (0-1)	SECONDARY 2) B.	COLLEGE (1-4 or 5 +) 5+	
FATHER'S A. FIRST NAME KENDALL	B. MIDDLE C.	TON, SR.	MOTHER'S MAIDEN NAME	A FIRST DOROTHY	B. MIDOLI	E C.L.		
INFORMANTS SIGNATURE CONT	T	ELATIONSHIP TO ECCASED E	ADDRESS PAI	STREET NO.	CITY AND S		ZIP90272 DES, CA	
BURIAL, CREMATION, DATE	CEMETERY OR CREM	ATORY NAME/LOCATION WN CREMATO		Z EMBALMER'S SIGNA	TURE OT EMBAI	LMED	CERT. NO.	
FUNERAL HOME NAM	E STREET ADDRESS	GITY A	(2) 額に選	FUNE THE STREET OF	or person acting	Such (SIGNATURE)	CERT. NO.	
TO THE BEST OF MY KN	MORTUARY, 5801 E.		ION	THE BASIS OF EXAMINATION	AND/OF INVESTI	GATION, IN MY OPINIO SE(S) AND MANNER ST	IN DEATH OCCURRED	
DUE TO THE GAUSE(S) S DUE TO THE GAUSE(S) S DUE TO THE GAUSE(S) S AND TITLE	STATED.			SIGNATURE AND FITLE	* 1	THOUR OF		
1 007 1	HOUR 32 PHYSICIAN IF OTHER THAN CERTIFIER (Type	of BEATH 760	ABA PER 32	re signed (Mo., Day, Year) DNOUNCED DEAD (Mo., Day		36.	NCED DEAD (Hour)	
33. NAME AND ADDRESS OF CERTIFIER, PHY.	SICIAN, MEDICAL EXAMINER OR TRIBAL LAW	VENFORCEMENT AUTHOR	ITY AUTHORIZE	-4	DICAL SXAMINER'S	S SIGNATURE:) 	
DATE REGISTERED REG. FILE NO		erde, Tucso	OII, A440.	Yes No REGENTISTRI	. 1	ATÉ REC'D. IN STATE	FFICE	
	TE CAUSE (FINAL DISEASE OF CONDITION R	ESULTING IN DEATH) (ENT				det villen de la companya de la comp	APPROXI-	
THE	OFF AS A CONSEQUENCE OF:		<u> </u>				MATE INTERVAL BETWEEN ONSET	
182238327	OR AS A CONSEQUENCE OF:	αα					AND DEATH	
PART II. Other significant conditions	contributing to death but not resulting in the	he underlying cause give	en in Part I	AUTOPSY (Specify Yes of 49. NO	r No) (Specify Ye	E REFERRED TO MEDI es or No.) YES-CREMA		
48. MANNER OF DEATH NATURAL CAUSES HOMICIDE	DATE OF MO DAY YR		(Specify Yes or No)	SCRIBE HOW INJURY OCCU				
ACCIDENT PENDING INVESTIGATION	SPECIFY	53. Milactory, office building, etc.)	WHERE LOCATED?	STREET ADDRES	з сп	ry or town	STATE	
51. SUICIDE UNDETERMINE SUPPLEMENTARY ENTRIES	^D 56.		57.				-	
Ju.		\$ 1						
	<u> </u>							

CERTIFIED COPY OF VITAL RECORDS

STATE OF ARIZONA COUNTY OF PIMA

DATE ISSUED AUGUST 25, 1997

This is a true and exact reproduction of the document officially registered and to be placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF HEALTH SERVICES, PHOENIX, ARIZONA. Issued under the authority of A.R.S. 36-341, and by direction of

DENNIS W. DOUGLAS
County Registrar
Pima County Health Department

This copy not valid unless prepared on engraved border displaying county seal in color and impressed with raised seal of issuing agency.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



-587972-