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Jan HANSEN
Frank PERSON

2. Name and address of receiving party(ies):

Name: KOZIOL GESCHENKARTIKEL GMBHAddress: WERNER-VON-SIEMENS-STRASSE 90Additional names(s) of conveying party(ies) ☐ Yes ☒ No

3. Nature of conveyance:

- ☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
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Execution Date: FEBRUARY 2, 5, 1999Additional name(s) & address(es) ☐ Yes ☒ No

4. Application number(s) or registration numbers(s):

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

Patent Application No. Filing date

(29/098,427)

12/28/98

B. Patent No.(s)

Additional numbers

☐ Yes ☒ No

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

Name: MICHAEL J. STRIKERRegistration No. 27233Address: 103 EAST NECK ROAD

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City: HUNTINGTON State/Prov.: NYCountry: U.S.A. ZIP: 117436. Total number of applications and patents involved: **1**7. Total fee (37 CFR 3.41):.....\$ 40.00

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

MICHAEL J. STRIKER

Name of Person Signing

Signature

MARCH 18, 1999

Date

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PATENT

REEL: 9843 FRAME: 0394

ASSIGNMENT

In consideration of value received, I, having a residence and post office address as stated below next to my name, the sole inventor (if only one name is listed below), or a joint inventor (if plural inventors are listed below), of an invention described in an application for a United States Patent of Prior Application entitled:

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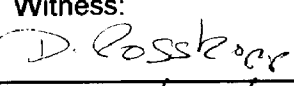
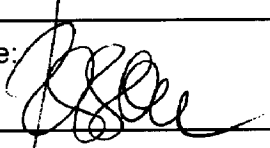

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The undersigned hereby grant(s) the firm of STRIKER, STRIKER & STENBY the power to insert on this assignment any further identification or modification which may be necessary or desirable in order to comply with the rules of the United States Patent and Trademark Office for recordation of this document.

Signature: 	Date: 2 Feb. 99	Residence and Full Postal Address: Gutav-Lorenz-Strasse 9 D-64283 Darmstadt Germany
Full Name of First or Sole Inventor: Jan HANSEN	Witness: 	
Signature: 	Date: 5/2/99	Residence and Full Postal Address: Gutav-Lorenz-Strasse 9 D-64283 Darmstadt Germany
Full Name of Second Inventor: Frank PERSON	Witness: 	
Signature:	Date:	Residence and Full Postal Address:
Full Name of Third Inventor:	Witness:	