FORM PTO-1619A
Expires 06/30/99
OMB 0651-07/E CEIVED
200 FEB 10 PM 12: 06
OPR/FINANCE

03/1 01 F 03-13-2000



U.S. Department of Commerce Patent and Trademark Office PATENT

101288399

RECORDATION FORM COVER SHEET PATENTS ONLY

TO: The Commissioner of Patents and Trademark	ks: Please record the attached original document(s) or copy(ies).				
Submission Type	Conveyance Type				
X New	X Assignment Security Agreement				
Resubmission (Non-Recordation) Document ID#	License Change of Name				
Correction of PTO Error Reel # Frame #	Merger Other				
Corrective Document	U.S. Government (For Use ONLY by U.S. Government Agencies)				
Reel # Frame #	Departmental File Secret File				
Conveying Party(ies)	Mark if additional names of conveying parties attached Execution Date Month Day Year				
Name (line 1) TRACE ATHLETIC CORPORATION					
Name (line 2)	Execution Date				
Second Party	Month Day Year				
Name (line 1)					
Name (line 2)					
Receiving Party	Mark if additional names of receiving parties attached				
Name (line 1) MICHAEL J. KELLY	If ocument to be recorded is an assignment and the				
Name (line 2)	re_eiving party is not demiciled in the United				
	SI tes, an appointment o a domestic				
Address (line 1) 808 NE 82ND STREET	representative is attached. (Prisignation must be a				
Address (line 2)	si parate document from A signment.)				
Address (line 3) SEATTLE	WA 98115				
Domestic Representative Name and Ac	State/Country Zip Code ddress Enter for the first Receiving Party only.				
,	Errer for the in a receiving rarry only.				
Name					
Address (line 1)					
Address (line 2)					
Address (line 3)					
Address (line 4)					
0/2000 DNGUYEN 00000222 5732411 FOR OFFICE USE ONLY					
C:581 40.00 OP					

Information Collection Budget Package 0651-002 Ž, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS

Mail documents to be recorded with required cover sheet(s) information to:

Commissioner of Patents and Trademarks, Box Assignments , Washington, D.C. 20231

gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, B.C. 20503. See OMB

PATENT REEL: 010589 FRAME: 0256

FORM	PTO-1619B
Expires 06/	30/99
OMD ORES	0027

Page 2

U.S. Department of Commerce Patent and Trademark Office PATENT

Correspondent Name and Address Area Code and Telephone Number 206-682-3333				
Name ZACHARY A. WRIGHT				
Address (line 1) SHORT CRESSMAN & BURGESS PLLC				
Address (line 2) 999 THIRD AVENUE, 30TH FLOOR				
Address (line 3) SEATTLE, WA 98104				
Address (line 4)				
Pages Enter the total number of pages of the attached conveyance document including any attachments.				
Application Number(s) Mark if additional numbers attached				
Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).				
Patent Application Number(s) Patent Number(s) 5732411				
5/32411				
If this document is being filed together with a <u>new</u> Patent Application, enter the date the patent application was signed by the first named executing inventor.				
Patent Cooperation Treaty (PCT)				
Enter PCT application number PCT				
only if a U.S. Application Number PCT PCT PCT				
has not been assigned. Number of Properties				
Enter the total number of properties involved. # 1				
Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$ 40.00				
Method of Payment: Enclosed X Deposit Account Deposit Account				
(Enter for payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: #				
Authorization to charge additional fees: Yes No				
Statement and Signature				
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. Charges to deposit account are authorized, as indicated herein.				
ZACHARY A. WRIGHT Zuchan A Whigh 2/9/00 Name of Person Signing Signature Date				
Name of Person Signing Signature Oate				

PATENT

REEL: 010589 FRAME: 0257

12/21/99 16:19 FAX 2062921995 JAMESON BABBITT

Ø1008≠006

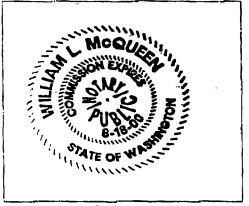
ASSIGNMENT OF PATENTS

Trace Athletic Corporation in consideration of a portion of \$10,000, the receipt of which is acknowledged, sells, assigns and transfers to Michael J. Kelly, whose address is 808 N.E. 82nd St., Seattle, WA 98115, the Letter Patent No. 5,787,501 for Hand and Wrist Protector for In-Line Skating and Letter Patent No. 5,732,411 for Adjustable Guard for the Lower Leg and Shin to be held and enjoyed by Michael J. Kelly for his own use and for his legal representatives and assigns, to the full end of the terms for which said Letters Patent are granted, as fully and entirely as the same would have been held by Trace Athletic Corporation had this assignment and sale not been made.

Executed 12-17	, 1999, at Scattle,	Washington.
		By: Steve Sarich, Jr., President
STATE OF WASHINGTON)) ss:	
COUNTY OF KING)	,

I certify that I know or have satisfactory evidence that Steve Sarich, Jr., is the person who appeared before me, and said person acknowledged that he signed this instrument, on oath stated that he was authorized to execute this instrument and acknowledged it as the president of Trace Athletic Corporation, a corporation, to be the free and voluntary act of such party for the uses and purposes mentioned in this instrument.

ECEMBER 17



(Use this space for notarial stamp/seal)

Print Name: WILL Am LMCQ VETER

NOTARY PUBLIC in and for the State of

Washington, residing at

My Appointment expires:

3

249094.1/5C3501I/017349.00001

RECORDED: 02/10/2000

PATENT REEL: 010589 FRAME: 0258