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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--|--|--|--|
| Form TO-1595                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 6-30-2000                                                                                                                                           | S DEPARTMENT OF COMMERCE             |  |  |  |  |
| 6.5.00 Q59569                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                     | atent and Trademark Office           |  |  |  |  |
| To the Honorable Assistant Commissioner for Pacents. Pt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 101394585                                                                                                                                           |                                      |  |  |  |  |
| 1. Name of conveying party(ies):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 2. Name and address of r                                                                                                                            |                                      |  |  |  |  |
| Taichi SHINTOU, Satoru FUJII and Shinji KUBO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Name:                                                                                                                                               | ecetifing party (100):               |  |  |  |  |
| Additional name(s) of conveying party(ies) attached?yesx no                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | SANKIO CHEMICAL CO., LTD. Internal Address: 1-1, Kyobashi 1-chome, Chuo-ku, Tokyo, JAPAN Street Address: Same as above                              |                                      |  |  |  |  |
| 3. Nature of Conveyance:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | City State                                                                                                                                          | Zip                                  |  |  |  |  |
| x_ Assignment Merger                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Additional name(s) & addr                                                                                                                           | ess(es) attached?                    |  |  |  |  |
| Security Agreement Change of Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | yesx no                                                                                                                                             |                                      |  |  |  |  |
| Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                     | . 100                                |  |  |  |  |
| Execution Date: May 26, 2000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 09,580                                                                                                                                              | 215 J                                |  |  |  |  |
| 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:  May 26, 2000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                     |                                      |  |  |  |  |
| A. Patent Application No.(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                     | Patent No(s).                        |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                                                                                                                                   | • •                                  |  |  |  |  |
| Additional numbers attached? Yes x No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                     |                                      |  |  |  |  |
| 5. Name and address of party to whom correspondence concerning document should be mailed:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 6. Total number of applic<br>One (1)                                                                                                                | cations and patents involved:        |  |  |  |  |
| SUGHRUE, MION, ZINN, MACPEAK & SEAS<br>2100 Pennsylvania Avenue, N.W.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                     |                                      |  |  |  |  |
| Suite 800 Washington, D.C. 20037-3202                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 7. Total Fee (37 CFR 3.41): \$ 40.00  x Enclosed. Please charge any underpayment in connection with this Assignment to Deposit Account No. 19-4880. |                                      |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Authorized to                                                                                                                                       | be charged to Deposit Account        |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8. Deposit Account No.                                                                                                                              |                                      |  |  |  |  |
| 72000 ASCRIT 00000092 09586752                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | (Attach dupl. copy of this                                                                                                                          | s page if paying by Deposit Account) |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | RITE IN THIS SPACE                                                                                                                                  |                                      |  |  |  |  |
| 9. Statement and Signature.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                     | i                                    |  |  |  |  |
| To the best of my knowledge and belief, the foregoing in copy of the original document.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                     | t and any attached copy is a true    |  |  |  |  |
| Name Mark Boland Reg. No. 32,197 Kce, No. 32                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | June 5, 2000  Date  PAGES INCLUDING COVER SHEE                                                                                                      | T. ATTACHMENTS AND DOCUMENT: 2       |  |  |  |  |
| OMB No. 0651-0011 (exp. 4/94)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                     |                                      |  |  |  |  |
| Do not detach this portion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                     |                                      |  |  |  |  |
| Mail documents to be recorded with required cover sheet information to:  Assistant Commissioner for Patents  Box Assignments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                     |                                      |  |  |  |  |
| Vashine Company of the Company of th | iton, D.C. 20231                                                                                                                                    |                                      |  |  |  |  |

PATENT REEL: 010879 FRAME: 0959

## Assignment

| Whereas, I/We, | Taichi  | SHINTOU, | Satoru | FUJII | and | Shinji | KUBO | of |
|----------------|---------|----------|--------|-------|-----|--------|------|----|
|                | Kanagaw | a, Japan |        |       |     |        |      |    |

hereinafter called assignor(s), have invented certain improvements in

PROCESS FOR PRODUCING A DIARYLAMINE

and executed an application for Letters Patent of the United States of America therefor on May 26, 2000 pg ; and

Whereas, SANKIO CHEMICAL CO., LTD. of 1-1, Kyobashi 1-chome, Chuo-ku, Tokyo, Japan

(assignee), desires to acquire the entire right, title, and interest in the application and invention, and to any United States patents to be obtained therefor;

Now therefore, for valuable consideration, receipt whereof is hereby acknowledged.

I/We, the above named assignor(s), hereby sell, assign and transfer to the above named assignee, its successors and assigns, the entire right, title and interest in the application and the invention disclosed therein for the United States of America, including the right to claim priority under 35 U.S.C. §119, and I/we request the Commissioner of Patents to issue any Letters Patent granted upon the invention set forth in the application to the assignee, its successors and assigns; and I/we will execute without further consideration all papers deemed necessary by the assignee in connection with the United States application when called upon to do so by the assignee.

I/We hereby authorize and request my attorneys SUGHRUE, MION, ZINN, MACPEAK & SEAS of

| 2100 Pennsylvania A | lvenue, N.W., Was | shington, D.C. 20037-3202 | to insert here in parentheses ( | Application |
|---------------------|-------------------|---------------------------|---------------------------------|-------------|
| number              | mber, filed       |                           | ) the filing date and appli     |             |
| number of said app  | lication when kno | own.                      |                                 |             |
| Date:May 26         | , 2000 s/         | Paichi                    | Shinton                         |             |
| Date: May 26        | 5, 2009/          | Satorie                   | Fujir                           |             |
| Date: May 26        | , 2000s/          | Shinji                    | Thulo                           |             |
| Date:               | s/                |                           |                                 |             |
| Date:               | s/                |                           |                                 |             |

(Legalization not required for recording but is prima facie evidence of execution under 35 U.S.C. §261)

8/92

RECORDED: 06/05/2000

PATENT REEL: 010879 FRAME: 0960