

08-04-2000



101423700

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

7-25-00

U.S. PTO
09/625173

**RECORDATION FORM COVER SHEET
PATENTS ONLY**

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

☒ New
☐ Resubmission (Non-Recordation)
Document ID#
☐ Correction of PTO Error
Reel # Frame #
☐ Corrective Document
Reel # Frame #

Conveyance Type

☒ Assignment ☐ Security Agreement
☐ License ☐ Change of Name
☐ Merger ☐ Other
U.S. Government
(For Use ONLY by U.S. Government Agencies)
☐ Departmental File ☐ Secret File

Conveying Party(ies)

☐ Mark if additional names of conveying parties attached
Execution Date
Month Day Year

Name (line 1)

Name (line 2)

Second Party

Name (line 1)

Name (line 2)

Execution Date
Month Day Year

09/625173

Receiving Party

☐ Mark if additional names of receiving parties attached

Name (line 1)

Name (line 2)

Address (line 1)

Address (line 2)

☐ If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

08/03/2000 TRADE 00000030-09625173
02 FC:581 00.00.00
Address (line 3)
State/Country Zip Code

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and 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, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, 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

PATENT
REEL: 010961 FRAME: 0433

Correspondent Name and Address

Area Code and Telephone Number (905) 272-2252

Name Marks & Clerk (Mississauga)

Address (line 1) 350 Burnhamthorpe Road West

Address (line 2) Suite # 402

Address (line 3) Mississauga, Ontario

Address (line 4) CANADA L5B 3J1

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

- 2 -

Application Number(s) or Patent 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)

If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing inventor.

Month Day Year

Patent Cooperation Treaty (PCT)

Enter PCT application number
only if a U.S. Application Number
has not been assigned.

PCT PCT PCT
PCT PCT PCT

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:
Deposit Account

Enclosed ☒

Deposit Account ☐

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

08-2040

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.

Donald E. HEWSON

Name of Person Signing

Signature

Date

July 21/00

A S S I G N M E N T

I, DICKIE, Robert G.
whose full postal address is:
15 Valley Trail
Newmarket, Ontario
CANADA L3Y 4V8

in consideration of US\$10.00, receipt of which is hereby acknowledged, do hereby sell and assign
unto:

Spark Innovations Inc.
2189 King Road
P.O. Box # 520
King City, Ontario
CANADA L7B 1G3

all of my interest in the United States, Canada, and all other jurisdictions in which a patent might be
issued, in and to my invention relating to:

DISPENSER FOR DENTAL FLOSS

as fully described and claimed in my United States application for a patent for such an invention, filed
simultaneously herewith; and to all my corresponding right, title and interest in and to any
corresponding patent which may issue therefor in the United States, Canada, or any other jurisdiction
in which a patent might be issued.

SIGNED AT : King City Ontario CANADA
 city province/state country

this 18 day of July, 2000.
 day month year

G. Flannery
Signature of Witness

[Signature]
Signature of Robert G. DICKIE

GWENN FLANNERY
Typed/printed name of Witness

DECLARATION OF WITNESS

I, GWENN FLANNERY
Typed/printed name of Witness
of MIDHURST ONTARIO CANADA
city province/state country

hereby declare that I was personally present and did see **ROBERT G. DICKIE** who is personally known to me to be the Assignor named above, duly sign and execute the same.

SIGNED AT: King City Ontario CANADA
city province/state country

this 18 day of July, 2000.
day month year

GWENN FLANNERY [Signature]
Typed/printed name of Witness Signature of Witness

ACKNOWLEDGEMENT

The above named Assignee hereby acknowledges this assignment.

[Signature] SPARK INNOVATIONS INC.
Signature of Witness Signature of Authorized Signing Officer

GWENN FLANNERY Robert G. DICKIE
Typed/printed name of Witness Typed/printed name of Authorized Signing Officer

President
Title of Authorized Signing Officer