Expires 06/30/99 OMB 0651-0027 01-11-2001

TO-1619A

U.S. Department of Patent and Trademark Office PATENT

1/18/00

101562058 RECORDATION FORM COVER SHEET PATENTS ONLY

2911-Z

Submission Type X) New Conveyance Type (X) Assignment () Security Agreement () Correction of PTO Error Rec! # Frame # () Micrger () 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 Name (line !) Surya Raghu Name (line 2) Second Party Name (line 2) Receiving Party () Mark if additional names of receiving parties attached Name (line 1) Name (line 2) Receiving Party () Mark if additional names of receiving parties attached Name (line 1) Name (line 2) Receiving Party () Mark if additional names of receiving parties attached () If decument to be recorded is an assignment and the control of the parties of the control of the parties of the control of the parties of the control of the control of the parties of the control of the parties of the control of the parties of the control of the control of the parties of the control o	TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).							
X								
() License () Change of Name	* *		,			O		
Document ID# () Merger () Other () Correction of PTO Error Reel # Frame # () Department (For Use ONLY by U.S. Government Reel # Frame # () Departmental File () Secret File Conveying Party(ies) ()Mark if additional names of conveying parties attached Month Day Year Name (line 1) Surya Raghu Name (line 2) Second Party Name (line 1) Name (line 2) Receiving Party ()Mark if additional names of receiving parties attached Name (line 1) Name (line 2) Receiving Party ()Mark if additional names of receiving parties attached Name (line 1) Name (line 2) Address (line 1) 6625 Dobbin Road Address (line 2) Address (line 3) Columbia, City Maryland State/Country Domestic Representative Name and Address Name Address (line 1) Address (line 2) Address (line 2)	(X) New	'	(X)	Assignment	()	Security Agreeme	ent	
Correction of PTO Error Ree! # Frame # Corrective Document Rec! # Frame # Conveying Party(ies) () Mark if additional names of conveying parties attached Name (line 1) Surya Raghu Name (line 2) Execution Date Month Day Year Name (line 2) Second Party Name (line 1) Name (line 2) Receiving Party Name (line 1) Name (line 2) Receiving Party Name (line 2) Receiving Party Name (line 2) Address (line 1) 6625 Dobbin Road Address (line 2) Address (line 3) Columbia, diy Maryland State/County Name Columbia, Maryland State/County Name Columbia State/County Name Address (line 2) Columbia State/County Receiving Party only. Name Address (line 2) Address (line 2)		·			. ,	_		
Reel # Frame # (U.S. Government (For Use ONLY by U.S. Government Agencies) Corrective Document Reel # Frame # () Departmental File () Secret File Conveying Party(ies) () Mark if additional names of conveying parties attached Name (line 1) Surya Raghu Name (line 2) Second Party Name (line 1) Name (line 2) Receiving Party () Mark if additional names of receiving parties attached Name (line 1) Name (line 2) Receiving Party () Mark if additional names of receiving parties attached Name (line 1) BOWLES FLUIDICS CORPORATION Name (line 2) Address (line 1) 6625 Dobbin Road Address (line 2) Address (line 3) Columbia, city State/Country Zip Code Domestic Representative Name and Address Enter for the first Receiving Party only. Name Address (line 1) Address (line 2)	() Car	rection of PTO firrar		Merger	()	Other		
Conveying Party(ies) () Mark if additional names of conveying parties attached Month Day Year Name (line 1) Surya Raghu Name (line 2) Execution Date Month Day Year 11 24 99 Execution Date Month Day Year 12 29 Execution Date Month Day Year 13 24 99 Execution Date Month Day Year 14 26 99 Execution Date Month Day Year 15 26 90 Execution Date Month Day Year 16 27 90 Execution Date Month Day Year 17 26 90 Execution Date Month Day Year 18 27 90 Execution Date Month Day Year 19 20 90 Execution Date Month Day Year 10 20 90 Execution Date Month Day Year 10 20 90 Execution Date Month Day Year 11 24 99 Execution Date Month Day Year 11 24 99 Execution Date Month Day Year 12 24 99 Execution Date Month Day Year 18 25 90 Execution Date Month Day Year 19 20 90 Execution Date Month Day Year 10 24 99 Execution Date Month Day Year 10 24 99 Execution Date Month Day Year 11 24 99 Execution Date Month Day Year 12 24 99 Execution Date Month Day Year 13 24 99 Execution Date Month Day Year 14 25 90 Execution Date Month Day Year 10 24 99 Execution Date Month Day Year 11 24 99 Execution Date Month Day Year 11 24 99 Execution Date Month Day Year 12 25 90 Execution Date Month Day Year 13 24 99 Execution Date Month Day Year 14 25 90 Execution Date Month Day Year 16 25 90 Execution Date Month Day Year 18 25 90 Execution Date Month Day Year 10 24 99 Execution Date Month Day Year 11 24 99 Execution Date Month Day Year 10 25 90 Execution Date Month Day Year 11 24 99 Execution Date Month Day Year 12 25 90 Execution Date Month Day Year 12					U.S. G	overnment		
Recl # Frame # () Departmental File () Secret File Conveying Party(ies) ()Mark if additional names of conveying parties attached Name (line 1) Surya Raghu Name (line 2)			}	· ·				
Conveying Party(ies) () Mark if additional names of conveying parties attached Name (line 1) Surya Raghu Name (line 2) Second Party Name (line 1) Name (line 2) Receiving Party () Mark if additional names of receiving parties attached Name (line 1) Name (line 1) BOWLES FLUIDICS CORPORATION Name (line 2) Address (line 1) 6625 Dobbin Road Address (line 3) Columbia, city Maryland State/Country Zip Code Domestic Representative Name and Address Enter for the first Receiving Party only. Name Address (line 1) Address (line 2)	·]	() D	epartme	ntal File () Secre	et File	
Name (line 1) Surya Raghu Name (line 2) Second Party Name (line 1) Name (line 2) Receiving Party Name (line 1) Name (line 2) Receiving Party Name (line 1) Name (line 2) Receiving Party () Mark if additional names of receiving parties attached Name (line 2) Address (line 1) Address (line 2) Address (line 3) Columbia, city Month Day Year 11 24 99 Execution Date Month Day Year 12 24 Month Day Year 13 24 99 Execution Date Month Day Year 14 20 Maryland States Address Addr								
Name (line 2) Second Party Name (line 1) Name (line 2) Receiving Party Name (line 1) BOWLES FLUIDICS CORPORATION Name (line 2) Address (line 1) Address (line 2) Address (line 3) Columbia, clty Maryland State/Country State/Country Execution Date Month Day Year Execution Date Month Day Year Month Day Year Execution Date Month Day Year Month Day Year Execution Date Month Day Year Execution Date Month Day Year I decument for be recorded is an assignment and the receiving party is not domicille in the United States, an appointment of a dumstific representative is attacked. (Designation must be a separate document from Assignment.) Address (line 3) Columbia, Maryland 21045 City State/Country Zip Code Domestic Representative Name and Address Enter for the first Receiving Party only. Name Address (line 1) Address (line 2)	Conveying	()Mark if a	addition	al names of conv	eying pa	rties attached		
Name (line 2) Second Party Name (line 1) Name (line 2) Receiving Party () Mark if additional names of receiving parties attached Name (line 1) Name (line 1) Name (line 2) Address (line 2) Address (line 3) Columbia, City Maryland State/Country City Maryland State/Country City Composition Representative Name and Address Enter for the first Receiving Party only. Name Address (line 2) Address (line 2)	Name (line	i) <u>Surya Raghu</u>					11 24 99	
Name (line 1) Name (line 2) Receiving Party ()Mark if additional names of receiving parties attached Name (line 1) BOWLES FLUIDICS CORPORATION Name (line 2) Address (line 1) 6625 Dobbin Road Address (line 2) Address (line 3) Columbia, city State/Country Zip Code Domestic Representative Name and Address Address (line 1) Address (line 2) Address (line 2)	Name (line	2)						
Receiving Party () Mark if additional names of receiving parties attached Name (line 1) BOWLES FLUIDICS CORPORATION Name (line 2) Address (line 1) 6625 Dobbin Road Address (line 2) Address (line 3) Columbia, city State/Country Zip Code Domestic Representative Name and Address Address (line 1) Address (line 2) Address (line 2)	Name (line	(1)					7.0 22, 7.02.	
Name (line 1) BOWLES FLUIDICS CORPORATION Name (line 2) Address (line 1) 6625 Dobbin Road Address (line 2) Address (line 3) Columbia, Maryland State/Country Zip Code Domestic Representative Name and Address Address (line 1) Address (line 2) Address (line 2)	Name (line	: 2)						
Name (line 1) Name (line 2) Address (line 1) Address (line 2) Address (line 3) Columbia, City Maryland State/Country Columbia City Conservation Enter for the first Receiving Party only. Name Address (line 1) Address (line 2)								
Address (line 1) 6625 Dobbin Road Address (line 2) Address (line 3) Columbia, Maryland 21045 City State/Country Zip Code Domestic Representative Name and Address Name Address (line 1) Address (line 2)	Name (line 1) BOWLES FLUIDICS CORPORATION an assignment and the receiving party is not							
Address (line 2) Address (line 3) Columbia, Maryland State/Country Zip Code Domestic Representative Name and Address Name Address (line 1) Address (line 2)	Name (line	Name (line 2) domicited in the United States, an appointment of						
Address (line 2) Address (line 3) Columbia, Maryland 21045 State/Country City Columbia State/Country City City Columbia State/Country City Columbia State/Country City City Columbia State/Country City Columbia State/Country City Columbia State/Country City Ci	Address (line 1) 6625 Dobbin Road							
City 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	e 2)						
Domestic Representative Name and Address Name Address (line 1) Address (line 2)	Address (line							
Name Address (line 1) Address (line 2)				State/Country		Zip Code		
Address (line 1) Address (line 2)	Domestic l	Representative Name and Address		Enter for ti	he first R	eceiving Party only.		
Address (line 2)	Name						·	
	Address (lin	c 1)					4	
	Address (line	e 2)					,	
Address (line 3)	Address (lin	e 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, Wushington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Wushington, 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: 011225 FRAME: 0843

FORM PTO-1619B Expires 06/30//9 OMB 0651-0027	Page 2	U.S. Department of Commerce Patent and Trademark Office PATENT				
	A. C. I. ATLANT					
Correspondent Name and Address	Arca Code and Telephone Nu	imber <u>(703) 684-833</u>				
Name Jim Zegeer						
Address (line 1) 801 N. Pitt Street, #108						
Address (line 2) Alexandria, Yirginia 22314						
Address (line 3)						
Address (linc 4)						
Pages Enter the total number of pages including any attachments.	pages of the attached conveyance do	cument #1				
Application Number(s) or Patent Nu	mber(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	r(s)	Patent Number(s)				
09/427,985		Tavelle Hamber (6)				
03/42/3/40						
If this document is being filed together with a new signed by the first named executing inventor.	 <u>v</u> Patent Application, enter the date the p	patent application was Month Day Year				
Patent Cooperation Treat (PCT)						
Enter PCT application number	PCT PCT	PCT				
only if a U.S. Application Number has not been assigned.	PCT PCT	PCT				
nas not been assigned.						
Number of Properties	mber of Properties Enter the total number of properties involved. #					
Fee Amount for Properties Listed (37 CFR 3.41): \$ 40.00 Method of Payment: Enclosed () Deposit Account (X)						
Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.) Deposit Account Number: # 26-0090						
	Authorization to charge	e additional fees: Yes (X) No ()				
Statement and Signature	PLEX	WE CHARGE REC				
To the best of my knowledge and attached copy is a true copy of the indicated herein.	l belief, the foregoing information he original document. Charges to	e additional fees: Yes (X) No () No () No () No () REC FEE is true and correct and any deposit account are authorized, as YYO.				
	Jun Sescer	<u>January 18, 2000</u>				
Jim Zegeer Name of Person Signing	Signature	Date				

PATENT **REEL: 011225 FRAME: 0844**

ASSIGNMENT Attorney Ref: 2911-Z WHEREAS, I, Surya Raghu, have invented an improvement in REVERSING CHAMBER OSCILLATOR, and WHEREAS, I have executed an application for United States Letters Patent based thereon, the ___ day of ______ 1999; and WHEREAS, BOWLES FLUIDICS CORPORATION, a corporation of the State of Maryland, and having a place of business at 6625 Dobbin Road, Columbia, MD 21045, is desirous of acquiring certain rights thereunder; NOW, THEREFORE, for one dollar (\$1.00) and other valuable considerations, receipt of all of which is hereby acknowledged, I have agreed to and do hereby sell, assign, and transfer unto said corporation my entire right, title, and interest in and throughout the United States of America (including its territories and dependencies) and all countries foreign thereto, in and to said invention, said application and any and all patents (including extensions thereof) of any country, which have been or may be granted on said invention or any part thereof, or on said application or any divisional, continuing, renewal, relasue, or other patent application, based in whole or in part thereon, or based upon said invention. TO BE HELD AND ENJOYED by said corporation, It successors and assigns, to the full ends of the respective terms for which said patents or any of them have been or may be granted, as fully and entirely as the same would have been held and enjoyed by me had no sale and assignment of said interest been made: And I hereby covenant and agree for myself, my heirs, and my legal representatives, to assist the said assignee in the prosecution of said application and in any interference which may arise involving said invention, and, upon request, to execute without further consideration all necessary and desirable divisional, continuing, renewal, reissue, or other applications for patents in any country, that might be deemed necessary by said assignee fully to secure to said assignee its interest as aforesaid in and to said invention or any part thereof, and in and to said several patents or any of them. Further, I hereby authorize the above-mentioned assignee to insert in this instrument the identifying serial number and filing date of the said application when received. And I do hereby authorize and request the Commissioner of Patent and Trademarks of the United States of America to issue any and all United States patents which may be granted upon said United States applications or any of them, or upon said invention or any part thereof, to said corporation. IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal this $\frac{24\%}{}$ day of November , 1999. Surya Raghu. State of On this 24th day of Drumber, 1999, before me a Notary Public, personally appeared the above-памеd Surya Raghu personally known to me and known to me to be the one who executed the foregoing instrument and subscribed the same in my presence, and acknowledged the same to be his free act and deed. My commission expires: ___ (Seal) 09/427,985 Serial No.

October 27, 1999

PATENT REEL: 011225 FRAME: 0845

RECORDED: 01/18/2000

Filed