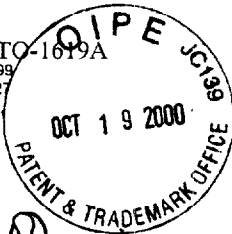


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Conveying Party(ies)

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Execution Date
Month Day Year
10062000

Name (line 1) Denise Honaker

Name (line 2)

Second Party

Name (line 1) Diana Brettrager

Name (line 2)

Execution Date
Month Day Year
10072000

Receiving Party

☐ Mark if additional names of receiving parties attached

Name (line 1) Mansfield Medical Products, Inc.
Name (line 2)
Address (line 1) 5 Cotton Lane
Address (line 2)
Address (line 3) Champlain NY 12919
City State/Country Zip Code

☐ 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.)

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Name Irwin Braude

Address (line 1) Mansfield Medical Products, Inc.

Address (line 2) 5 Cotton Lane

Address (line 3) Champlain, New York 12919

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Correspondent Name and Address

Area Code and Telephone Number (213) 229-2868

Name Elliott Benjamin

Address (line 1) Shumaker Steckbauer Weinhart & Sragow, LLP

Address (line 2) 300 South Grand Avenue

Address (line 3) Suite 1400

Address (line 4) Los Angeles, CA 90071

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Patent Number(s)

5833093		

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

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1

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To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Charles M. Shumaker

Name of Person Signing

Signature

October 17, 2000

Date

Attorney-in-fact for Denise Honaker and Diana Brettrager

ASSIGNMENT OF ALL RIGHT, TITLE AND INTEREST IN UNITED STATES PATENT
NO. 5,833,093

WHEREAS, Denise Honaker, 22716 Kathryn Avenue, Torrance, California 90505 and Diana Brettrager, 145 Poppy Avenue, Monrovia, California 91016 are the owners of all right, title and interest of United States Patent No. 5,833,093 entitled "Protective Cover For Small Spray Dispensers and Medicated Inhalers" free of all encumbrances; and

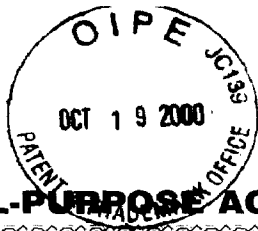
WHEREAS, Mansfield Medical Products, Inc., a New York Corporation, 5 Cotton Lane, Champlain, New York is desirous of acquiring all right, title and interest in United States Patent No. 5,833,093, free of all encumbrances;

NOW, THEREFORE, for the sum of ten (\$10) dollars, and for other good and valuable consideration, receipt of which is hereby acknowledged, Denise Honaker and Diana Brettrager, do hereby assign to Mansfield Medical Products, Inc. all right, title and interest in and to United States Patent No. 5,833,093, free of any and all encumbrances.

The undersigned further agree to execute and deliver any and all such additional documents as may be required by the United States Patent and Trademark Office to effectuate the recordation of this Assignment.

Date: 10/6/00 Denise Honaker
DENISE HONAKER

Date: 10/7/00 Diana Brettrager
DIANA BRETTRAGER



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Los Angeles

} ss.

On October 6, 2000, before me, ARNIE GOLDSTEIN, Notary Public
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared DENISE HONAKER
Name(s) of Signer(s)

☐ personally known to me
☒ proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



Place Notary Seal Above

WITNESS my hand and official seal.

Arnie Goldstein
Signature of Notary Public

OPTIONAL

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- ☐ Individual
☐ Corporate Officer — Title(s): _____
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☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here



STATE OF CALIFORNIA)
) SS.
COUNTY OF LOS ANGELES)

On this 7 day of October, 2000, before me, Edward B. Ashton, a Notary Public, personally appeared Diana B. Beyer, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal

Signature

