Cond to 00 food (given addressed) To be detings of conveying party(ies): Name of conveying party(ies): Michael Roberts Additional name(s) of conveying party(ies) attached? Yes Who 3. Nature of conveyance: Yes Security Agreement Other	Form PTO-1595 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002)	REC' 1015	912389	U.S. DEPARTMENT OF CON U.S. Patent and Tradema
1. Name of conveying party(ies): 2. Name and address of receiving party(ies): Michael Roberts Name: Play Sports Company Pty Ltd Additional name(s) of conveying party(ses) attached? Yes IN No Name: Play Sports Company Pty Ltd Internal Address: Internal Address: Nature of conveyance: Change of Name Nature of conveyance: Change of Name Nother Change of Name Other City: Windsor Vic 3181 Street Address: 49-51 Wellington Street Additional name(s) & address of party to whom correspondence concerning document should be mailed: B. Patent No.(s) 29/149,432 Additional numbers attached? Yes IN No 5. Name and address of party to whom correspondence concerning document should be mailed: 6. Total number of applications and patents involocies of party to whom correspondence concerning document should be mailed: 7. Total fee (37 CFR 3.41)		▼ ▼	▼	V V V
Michael Roberts Name: Play Sports Company Pty Ltd Additional name(s) of conveying party(es) attached? Yes No Internal Address: 3. Nature of conveying party(es) attached? Yes No No 3. Nature of conveying party(es) attached? Yes No Street Address: 49-51 Wellington Street City: Windsor Vic 3181_State: Australia Zip: Additional name(s) & address(es) attached? Yes City: Windsor Vic 3181_State: Australia Zip: Additional name(s) & address(es) attached? Yes A. 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: A. Patent Application No.(s) B. Patent No.(s) 29/149,432 Additional name(s) & address(es) attached? Yes S. Name and address of party to whom correspondence concerning document should be mailed: S. Total number of applications and patents involvence concerning document should be mailed: Name: Killworth, Gottman, Hagan & Schaeff, LLP Internal Address: Street Address: One Dayton Centre One South Main Street, Suite 500	To the Honorable Commissioner	of Patents and Trademarks:	Please record the attac	hed original documents or copy thereof
Additional name(s) of conveying party(ies) attached? Yes No Additional name(s) of conveying party(ies) attached? Yes No 3. Nature of conveyance: Street Address: 49-51 Wellington Street City: Windsor Vic 3181 State: Australia Zip: Additional name(s) & address: Australia Zip: City: Windsor Vic 3181 State: Australia Zip: Additional name(s) & address(es) attached? Yes Additional name(s) & address(es) attached? Yes 4. Application number(s) or patent number(s): B. Patent No.(s) 29/149,432 Additional numbers stached? Yes S. Name and address of party to whom correspondence concerning document should be mailed: B. Patent No.(s) 8. Deposit account number: Internal Address:	1. Name of conveying party(ies):			
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If this document is being filed together with a new application, the execution date of the application is: A. Patent Application No.(s) 29/149,432 Additional numbers attached? Yes No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Killworth, Gottman, Hagan & Schaeff, LLP Internal Address: One South Main Street, Suite 500 City: Dayton State: OH Zip: 45402 DO NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached cor is a true copy of the original document. James E. Beyer December 7, 2 Name of Person Signing Total number of pages including cover sheet, attachments, and documents:				
A. Patent Application No.(s) B. Patent No.(s) 29/149,432 Additional numbers attached? Yes No 5. Name and address of party to whom correspondence concerning document should be mailed: 6. Total number of applications and patents involved concerning document should be mailed: 7. Total fee (37 CFR 3.41)\$ 40.00 Name: Killworth, Gottman, Hagan & Schaeff, LLP F. Total fee (37 CFR 3.41)\$ 40.00 Internal Address:			ication, the executio	n date of the application is:
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5. Name and address of party to whom correspondence concerning document should be mailed: 6. Total number of applications and patents involved concerning document should be mailed: Name: Killworth, Gottman, Hagan & Schaeff, LLP Internal Address: 7. Total fee (37 CFR 3.41)\$40.00 Internal Address: 40.00 Street Address: One Dayton Centre One South Main Street, Suite 500	29/149,452	Additional numbers a	 ttached? 🖵 Yes 🖾 N	No
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Street Address: One Dayton Centre One South Main Street, Suite 500 City: Dayton State: OH Zip: 45402 (Attach duplicate copy of this page if paying by deposition DO NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached corris a true copy of the original document. James E. Beyer December 7, 2 Name of Person Signing Signature Total number of pages including cover sheet, attachments, and documents:	concerning document should be Name: Killworth, Gottman, Hagan	mailed: & Schaeff, LLP	7. Total fee (37 C	FR 3.41)\$40.00
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City: Dayton State: City: Zip: 43402 DO NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached co is a true copy of the original document. James E. Beyer December 7, 2 Name of Person Signing Date Total number of pages including cover sheet, attachments, and documents: 6	concerning document should be Name: Killworth, Gottman, Hagan Internal Address: 	mailed: & Schaeff, LLP	7. Total fee (37 C	FR 3.41)\$40.00
9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached correct is a true copy of the original document. James E. Beyer December 7, 2 Name of Person Signing Date Total number of pages including cover sheet, attachments, and documents:	concerning document should be Name: Killworth, Gottman, Hagan Internal Address: 	mailed: a & Schaeff, LLP e	7. Total fee (37 C Enclosed Authorized 8. Deposit account	FR 3.41)\$40.00
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Mail documents to be recorded with required cover sheet information to:	<pre>concerning document should be Name: Killworth, Gottman, Hagan Internal Address:</pre>	mailed: <u>& Schaeff, LLP</u> <u>e</u> <u>Zip: 45402</u> <u>DO NOT USI</u> <u>d belief, the foregoing</u> <u>ument.</u>	7. Total fee (37 C Enclosed Authorized 8. Deposit account (Attach duplicate co E THIS SPACE	FR 3.41)\$40.00

REEL: 012348 FRAME: 0347

ASSIGNMENT OF DESIGN

WHEREAS, I, **Michael Roberts**, of Windsor Vic, Australia, invented certain new, original and ornamental design **SET OF GOLF CLUB HEADS** for which I executed an application for a United States Design Letters Patent and for which said application for United States Design Letters Patent was filed on October 10, 2001, under

EPatent Application Serial No. 29/149,432

⊠Attorney Docket No. GRI 0027 DA;

WHEREAS, I hereby authorize and request the attorney(s) and/or agent(s) empowered to act on my behalf in the aforementioned application, to insert above the filing date and application number of said application, when known;

AND WHEREAS, **Play Sports Company Pty Ltd**, an Australian corporation, with a place of business at 49-51 Wellington Street, Windsor Vic 3181, Australia, hereinafter called the Assignee, is desirous of acquiring the entire right, title and interest in and to said design application and the inventions therein disclosed and any design letters patent that may issue thereon;

NOW, THEREFORE, for good and valuable consideration, receipt whereof is hereby acknowledged, I hereby sell, assign and transfer unto said Assignee, its successors and assigns, the entire right, title and interest in and to said design application and any divisions or continuations thereof, and the inventions therein disclosed, and any improvements thereon, and any patent or patents that may be issued or reissued thereon, and I hereby authorize and request the Commissioner of Patents and Trademarks to issue any letters patent thereon, and reissues thereof, to said Assignee, its successors and assigns; and I hereby authorize said Assignee, its successors and assigns, to file in its own name applications for patent in foreign countries in connection with the inventions hereby transferred, under the International Convention claiming the priority of said United States application or otherwise, and to secure in its own name the patent or patents issued thereon; and I hereby agree that, upon request, I will sign all papers, and make all rightful oaths, and do all acts which said Assignee, its successors or assigns, may consider necessary in connection with said United States application, and in connection with any other United States or foreign applications that may be filed in connection with said inventions, and with any improvements thereon, and in connection with any patents issued or reissued thereon.

IN TESTIMONY WHEREOF, I hereunto set my hand and seal this 27 day of housing, 2001.

h P-Connet

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hypourter.

Michael Roberts

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

EEE TDANQMITTA	Complete if Known								
FEE TRANSMITTAL			Application Number			29/149,432			
for FY 2002		Filing Date		October 10,, 2001					
		First Named Inventor		rentor	Michael Roberts				
Patent fees are subject to annual revision.		Examiner Name				·			
		— Group Art Unit			2900				
TOTAL AMOUNT OF PAYMENT (\$) 40.00		Atto	rney [Docket	t No.	GRI 00	27 DA		
METHOD OF PAYMENT		FEE CALCULATION (continued)							
1. The Commissioner is hereby authorized to charge	3. A	DDI	ION/	AL FE	ES				
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FEE CALCULATION		,			Examin	er action			
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101 740 201 370 Utility filing fee 106 330 206 165 Design filing fee	128	1,960	228	980	Extensi	on for repl	y within fifth n	nonth	
107 510 207 255 Plant filing fee	119	320	219	160		of Appeal	•		
108 740 208 370 Reissue filing fee	120	320	220	160	Filing a	brief in su	pport of an ap	opeal	
114 160 214 80 Provisional filing fee	121	280	221	140	Reques	t for oral h	earing		
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Independent	144	620	244	310	Plant is	sue fee			
Multiple Dependent	122	130	122	130	Petition	s to the Co	ommissioner		
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102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid	146	740	246	370		submissio R§ 1.129(a	n after final re a))	ejection	
109 84 209 42 ** Reissue independent claims	149	740	249	370			al invention to R § 1.129(b))		
over original patent 110 18 210 9 ** Reissue claims in excess of 20	179	740	279	370	Reques	t for Conti	nued Examin	ation (RCE)	
and over original patent	169	900	169	900	Reque	st for expe	dited examination	ation	
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**or number previously paid, if greater; For Reissues, see above	*Red	luced l	oy Basi	c Filing	Fee Pa	d S	UBTOTAL	(3) (\$)	40.00
SUBMITTED BY Name (Print/Type) James E. Beyer			ration I		9,564		Telephone	(937) 223-2	2050
Signature		(Attorne	y/Agent	<u> 1</u>	7,507		Date	. ,	
Signature Date December 7, 2001 WARNING Information on this form may become public. Credit card information should not									

be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents. Assistant DC 20231.

REEL: 012348 FRAME: 0350



	red to respond to a collection of information unless it displays a valid OMB control num Complete if Known			
FEE TRANSMITTA	Application Number 29/149,432			
	Filing Date October 10,, 2001			
for FY 2002	First Named Inventor Michael Roberts			
	Examiner Name			
Patent fees are subject to annual revision.	Group Art Unit 2900			
TOTAL AMOUNT OF PAYMENT (\$) 40.00	Attorney Docket No. GRI 0027 DA			
METHOD OF PAYMENT	FEE CALCULATION (continued)			
The Commissioner is bereby authorized to charge	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to:	Large Small			
Deposit Account	Entity Entity Fee Fee Fee Fee Fee Pa			
Number	Fee Fee Fee Description Fee Pa Code (\$) Code (\$)			
Account	105 130 205 65 Surcharge - late filing fee or oath			
Name Charge Any Additional Fee Required	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Under 37 CFR 1.16 and 1.17	139 130 139 130 Non-English specification			
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for <i>ex parte</i> reexamination			
2. X Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action			
Check X Credit card Greer Order Other	113 1,840* 113 1,840* Requesting publication of SIR after			
FEE CALCULATION	Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month 116 400 216 200 Extension for reply within second month			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	117 920 217 460 Extension for reply within third month			
Code (\$) Code (\$) Fee Paid	118 1,440 218 720 Extension for reply within fourth month			
101 740 201 370 Utility filing fee	128 1,960 228 980 Extension for reply within fifth month			
106 330 206 165 Design filing fee	119 320 219 160 Notice of Appeal			
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal			
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing			
SUBTOTAL (1) (\$) -0-	138 1,510 138 1,510 Petition to institute a public use proceeding			
	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional			
Extra Claims below Fee Paid Total Claims -20** = X =	142 1,280 242 640 Utility issue fee (or reissue) 143 460 243 230 Design issue fee			
Independent - 3** = X = =	144 620 244 310 Plant issue fee			
Multiple Dependent	122 130 122 130 Petitions to the Commissioner			
	123 50 123 50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))			
104 280 204 140 Multiple dependent claim, if not paid 109 84 209 42 ** Reissue independent claims	149 740 249 370 For each additional invention to be examined (37 CFR § 1.129(b))			
over original patent 110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)			
and over original patent	169 900 169 900 Request for expedited examination			
SUBTOTAL (2) (\$) -0-	of a design application			
SUBTOTAL (2) (\$) -0- **or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00			
	Complete (if applicable) Registration No. 39,564 Telephone (937) 223-2050			
Name (Print/Type) James E. Beyer	(Attomey/Agent) 39,364 (937) 223-2030			
Signature	Date December 7, 2001			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Dependent Office, Washington, 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. RECORDED: 12/11/2001 REEL: 012348 FRAME: 035				