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Name of conveying party(ies):			ŧ	s of receiving party(ies)	U.S.
Legal Representative of Ro	ger S. I	Kincel	Name:Jonns	ton International Corp.	<del></del> =2
Luis C. Contreras	2//	22	Internal Address:		<u>-</u>
Additional name(s) of conveying party(les)	attached	? Yes 🛭 No			<del></del>
3. Nature of conveyance:	<b>-</b>				
Assignment Assignment	Mer Mer	ger	Street Address: _	P.O.Box 10059	
Security Agreement	Cha	inge of Name	_ olloot / ladioos		
Other			Santa A	CA 0	•
			City: Santa A	na State: CA Zip: 9	2701
Execution Date: 2 2 - 25-	- C'7		Additional name(s) & a	address(es) attached? 📮 Yes 📮	No
4. Application number(s) or patent	t numbe	r(s):			
If this document is being filed to	gether	with a new appli	cation, the execution d	ate of the application is:	ス8-07
A. Patent Application No.(s)			B. Patent No.(s)		
	Ad	ditional numbers att	! ached? 📮 Yes 🔁 No		
Name and address of party to v concerning document should be	vhom co	rrespondence		plications and patents involved	: 🕕
Luis C Contrara		•	7. Total fee (37 CFR	3.41)\$40.00	
Name			Enclosed	•	
Internal Address:			Authorized to	be charged to deposit account	
			8. Deposit account no	umber:	
Street Address: 1500 E. Ches	tnut Sti	reet			
City: Santa Ana State: CA	A Ziş	92701	(Attach duplicate copy of	of this page if paying by deposit acco	unt)
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9. Statement and signature.			and the second s		
To the best of my knowledge an is a true copy of the original doo		, the foregoing i	nformation is true and	correct and any attached copy	,
Luis C. Contreras	umoni.				<b>\</b>
Name of Person Signing	g		Signature	<u> </u>	
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ASSIGNMENT OF APPLICATION	N	Docket Number 0056	
Legal Representative of Roger S. Kincel	Carlsbad, Calif	ornia	and
Whereas, I, Luis C. Contreras ofof	Placentia, Califo	ornia '	, hereafte
referred to as applicant, have invented certain new and a		n	
for which an application for a United States Pates Application Number/			
for which an application for a United States Pate	nt was executed on <u></u>	3-38-0	and
Whereas, Johnston International Corp. of	Santa Ana, Californ	nia herei	in referred to
	059 Santa Ana, CA		
assignee whose post office address is			
sirous of acquiring the entire right, title and interest in the			
Now, therefore, in consideration of the sum of one	_ dollars (\$ <u>1.00</u>	_), the receipt wh	nereof is ac
knowledged, and other good and valuable consideration	, I, the applicant, by th	nese presents do	sell, assign
and transfer unto said assignee the full and exclusive rig	ht to the said invention	n in the United St	ates and th
entire right, title and interest in and to any and all Patents	which may be granted	I therefor in the U	nited States
hereby authorize and request the Commissioner of Pa	tents and Trademark	s to issue said U	nited States
Patent to said assignee, of the entire right, title, and inter	est in and to the same	, for his sole use	and behoof
and for the use and behoof of his legal representatives, t			
be granted, as fully and entirely as the same would have	been neid by me nad	ins assignment	and Sale no
been made.	•		
Executed this day of	anvary.	, 1g 2C	<u> </u>
at 3:35pm, San Diego C	alifornia		,
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- LEYVO /V VIVC and	f con		
Legal Representative of Roger S. Kincel State of Caronica SS:	' Luis	C. Contreras	
County of EXID DI OCC)	pert and	Luis Cont	rera <
Before me personally appeared said Karua Hk			i mana i mining
and acknowledged the foregoing instrument to be his free day of	www. 6116		
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Seal	(N	otary Public)	

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before me, Deanna Jerus Notary Public Personally appeared Adrya M. Kincel Adams of Total Officer tea, July S. Commercial Public Personally known to me – OR – Il proved to me on the basis of satisfactory evidence to be the personal whose name (a) is size subscribed to the within instrume and acknowledged to me that he/sin (the same in his/her/file) authorized capacity (tes). and this his/her/file) authorized capacity (tes) and that his/her/file) authorized capacity (tes) and that his/her/file) authorized capacity (tes) and that his/her/file) authorized capacity (tes) and the information below is not required by law, it may prove valuable to persons relying on the document and could prevent faudulent removal and reattachment of this form to another document.  **Description of Attached Document**  Title or Type of Document: USSI ment of Capacity (tes) Claimed by Signer(s)  Signer(s) Other Than Named Above: NCN & Signer's Name:  Individual Corporate Officer Title(s):  Partner Limited General Attorney-in-Fact  Trustee Guardian or Conservator  Other:  Top of thumb here  Other:  Top of thumb here	State of Carrior 1100	
personally known to me — OR — Proved to me on the basis of satisfactory evidence to be the person, whose name is far subscribed to the within instrume and acknowledged to me that he/she/fire/secouted it same in his/her/fire/pauthorized capacity(Es), and that his/her/fire/pauthorized capacity(Es).  OPTIONAL  Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.  Description of Attached Document  Title or Type of Document: USSIGNMENT of Capacity (Ites) Claimed by Signer(s)  Signer(s) Other Than Named Above: NCN  Capacity(ies) Claimed by Signer(s)  Signer's Name: Signer's Name: Individual Corporate Officer  Title(s): Partner — Limited General  Attorney-in-Fact  Trustee Guardian or Conservator  Other: Trustee Guardian or Conservator  Other: Trustee	County of MIN DIEGO	
personally known to me — OR — Proved to me on the basis of satisfactory evidence to be the person, whose name is far subscribed to the within instrume and acknowledged to me that he/she/fire/secouted it same in his/her/fire/pauthorized capacity(Es), and that his/her/fire/pauthorized capacity(Es).  OPTIONAL  Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.  Description of Attached Document  Title or Type of Document: USSIGNMENT of Capacity (Ites) Claimed by Signer(s)  Signer(s) Other Than Named Above: NCN  Capacity(ies) Claimed by Signer(s)  Signer's Name: Signer's Name: Individual Corporate Officer  Title(s): Partner — Limited General  Attorney-in-Fact  Trustee Guardian or Conservator  Other: Trustee Guardian or Conservator  Other: Trustee	On before me	Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally known to me — OR — Proved to me on the basis of satisfactory evidence to be the person, whose name is far subscribed to the within instrume and acknowledged to me that he/she/fire/secouted it same in his/her/fire/pauthorized capacity(Es), and that his/her/fire/pauthorized capacity(Es).  OPTIONAL  Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.  Description of Attached Document  Title or Type of Document: USSIGNMENT of Capacity (Ites) Claimed by Signer(s)  Signer(s) Other Than Named Above: NCN  Capacity(ies) Claimed by Signer(s)  Signer's Name: Signer's Name: Individual Corporate Officer  Title(s): Partner — Limited General  Attorney-in-Fact  Trustee Guardian or Conservator  Other: Trustee Guardian or Conservator  Other: Trustee	personally appeared Katya M. Kir	ncel and Luis Contrerais
OPTIONAL  Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevention fraudulent removal and reattachment of this form to another document.  Description of Attached Document  Title or Type of Document: USSIGMENT Of Capacity(les) Claimed by Signer(s)  Signer(s) Other Than Named Above: None  Capacity(les) Claimed by Signer(s)  Signer's Name: Signer's Name: Individual Corporate Officer Title(s): Partner Limited General Attorney-in-Fact Trustee Guardian or Conservator Other: Top of thums here    Individual Corporate Officer Title(s): Partner Conservator Other:   Conservator Other:   Conservator Other:   Conservator Other:   Conservator   Conservator Other:   Conservator   Conservato	personally known to me – <b>OR</b> – Typroved to m	whose name(s) is/are subscribed to the within instrumer and acknowledged to me that he/she they executed the same in his/her/their authorized capacity(les), and that b his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted
Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.  Description of Attached Document  Title or Type of Document:  Document Date:  1-30-02  Number of Pages:  Number of Pages:  Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Individual  Corporate Officer  Title(s):  Partner —   Limited   General  Attorney-in-Fact  Trustee  Guardian or Conservator  Other:  Top of thumb here  Top of thumb here  Top of thumb here	COMM. # 1190348  COMM. # 1190348  SAN DIEGO COUNTY  COMM. EXP. JULY 18, 2002	WITNESS my hand and official seal.  Additional seal.  Signature of plotary Public
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Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Individual Corporate Officer Title(s): Partner —   Limited   General Attorney-in-Fact Trustee Guardian or Conservator Other:  RIGHT THUMBPRINT OF SIGNER Top of thumb here  RIGHT THUMBPRINT OF SIGNER Top of thumb here	Description of Attached Document	chment of this form to another document.
Capacity(ies) Claimed by Signer(s)  Signer's Name:  Individual  Corporate Officer  Title(s):  Partner — Limited General  Attorney-in-Fact  Trustee  Guardian or Conservator  Other:  Top of thumb here  Signer's Name:  Individual  Corporate Officer  Title(s):  Partner — Limited General  Attorney-in-Fact  Trustee  Guardian or Conservator  Other:  Other:  RIGHT THUMBPRINT  OF SIGNER  Top of thumb here	Description of Attached Document  Title or Type of Document:	ent of another document.
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Corporate Officer Title(s):  Partner —	Description of Attached Document  Title or Type of Document: USSIGNM  Document Date: 1-30-02  Signer(s) Other Than Named Above: Non  Capacity(ies) Claimed by Signer(s)	ent of Caplication  Number of Pages:
Title(s):  Partner — Limited General  Attorney-in-Fact  Trustee  Guardian or Conservator  Of Signer  Top of thumb here  Title(s):  Partner — Limited General  Attorney-in-Fact  Trustee  Guardian or Conservator  OF Signer  Top of thumb here	Description of Attached Document  Title or Type of Document: USSIGNM  Document Date: 1-30-02  Signer(s) Other Than Named Above: Non  Capacity(ies) Claimed by Signer(s)	ent of Caplication  Number of Pages:
Attorney-in-Fact  Trustee  Guardian or Conservator  Other:  Top of thumb here  Partner — Limited Li General  Attorney-in-Fact  Trustee  Guardian or Conservator  OF SIGNER  Top of thumb here	Description of Attached Document  Title or Type of Document: USSIGNM  Document Date: 1-30-02  Signer(s) Other Than Named Above: NCM  Capacity(ies) Claimed by Signer(s)  Signer's Name: Individual	ent of Caplication  Number of Pages:  Signer's Name:
Trustee ☐ Guardian or Conservator ☐ Other: ☐ Trustee ☐ Trustee ☐ Guardian or Conservator ☐ Other: ☐ Other: ☐ Trustee	Description of Attached Document  Title or Type of Document: USSIGMM  Document Date: I-30-02  Signer(s) Other Than Named Above: NCM  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Individual  Corporate Officer  Title(s):	Signer's Name:  Individual Corporate Officer Title(s):
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	Description of Attached Document  Title or Type of Document:	Signer's Name:  Individual Corporate Officer Title(s): Partner — Limited General Attorney-in-Fact Trustee
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Signer is representing:	Description of Attached Document  Title or Type of Document:	Signer's Name:    Individual   Corporate Officer   Title(s):   Partner —   Limited   General   Attorney-in-Fact   Trustee   Guardian or Conservator   RIGHT THUMBPRINT OF SIGNER
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**RECORDED: 03/13/2002** 

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