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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

WEST COAST HAIR SYSTEMS, LLC

2. Name and address of receiving party(ies)

Name: CONAIR CIP, INC.

Internal Address: _____

Additional name(s) of conveying party(ies) attached? ☐ Yes ☐ No

3. Nature of conveyance:



Assignment



Merger



Security Agreement



Change of Name



Other _____

Street Address: One Cummings Pt. Rd.

City: Stamford

State: CT

Zip: 06902

Execution Date: July 16, 2002

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application number(s) or patent number(s): 5,865,188

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)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: CONAIR CIP, INC.

Internal Address: LEGAL DEPT.

KATHY Andrade

Street Address: One Cummings Pt. Rd.

City: Stamford State: CT Zip: 06902

6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 3.41).....\$ 40.00



Enclosed



Authorized to be charged to deposit account

8. Deposit account number:

501239

(Attach duplicate copy of this page if paying by deposit account)

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9. 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.

KATHLEEN A. Andrade

Name of Person Signing

Kathleen A. Andrade

Signature

9/19/02

Date

Total number of pages including cover sheet, attachments, and documents: 3

Mail documents to be recorded with required cover sheet information to:

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Washington, D.C. 20231

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PATENT
REEL: 013323 FRAME: 0061

CORPORATE ASSIGNMENT

WHEREAS, WEST COAST HAIR SYSTEMS, LLC, a limited liability company organized under the laws of California and located at Long Beach, California (hereinafter referred to as "Assignor"), is the owner of United States Letters Patent No. 5,865,188 issued February 2, 1999, titled BRUSH FOR STRAIGHTENING HAIR (hereinafter referred to as "said Letters Patent"); and

WHEREAS, CONAIR CIP, INC., a Delaware corporation, with its place of business at One Cummings Point Road, Stamford, Connecticut, 06902 (hereinafter referred to as "Assignee"), wishes to acquire the entire right, title and interest in and to said Letters Patent;

NOW THEREFORE, for valuable and legally sufficient consideration, receipt of which is hereby acknowledged, the Assignor sells, assigns and transfers to Assignee, its successors and assigns, the entire right, title and interest to said Letters Patent;

The Assignor will execute and deliver to Assignee any documents which may be requested by Assignee to carry out the terms of this Assignment; and

Assignor covenants, agrees and warrants that Assignor has full and unencumbered title to said Letters Patent, and further covenants and agrees that Assignor has the right to grant such rights to said Letters Patent and will at any time upon request without cost to Assignor or further compensation, execute and deliver any and all papers or instruments that, in the opinion of the Assignee, may be necessary or desirable to secure said Assignee the full enjoyment of the rights and properties hereby conveyed or intended to be conveyed by this instrument.

IN WITNESS WHEREOF, Assignor has caused this Assignment to be executed by its duly authorized officer effective as of the 10th day of July, 2002.

WEST COAST HAIR SYSTEMS, LLC.

By: _____

Name: Adam Leiter

Title: President

STATE OF CALIFORNIA)

COUNTY OF _____)

SS

(see attachment)

Sworn to and subscribed before me this _____ day of _____, 2002.

[seal]

Notary Public

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

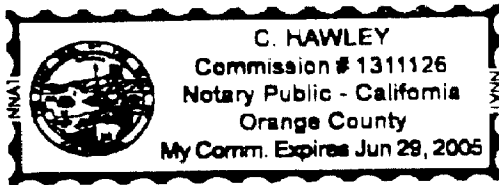
County of Orange

} ss.

On July 16, 2002, before me, C. Hawley Notary Public
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared Adam Leitch
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.

WITNESS my hand and official seal.

Place Notary Seal Above

Signature of Notary Public

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: _____

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Signer's Name: _____

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☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER

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