

10-29-2002



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 c857 U.S. PTO  
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Form PTO-1595 (Rev. 03/01)  
 OMB No. 0651-0027 (exp. 5/31/2002)  
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**RECORDATION FORM COVER SHEET  
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U.S. DEPARTMENT OF COMMERCE  
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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): Mario DI GIROLAMO  Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies) Name: OPAL LIMITED Internal Address: New Moon House, P.O. Box N-1808, Nassau, BAHAMAS  Street Address: None  City: Nassau State: BAHAMAS Zip: _____ Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____  Execution Date: October 17, 2002	4. 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: October 17, 2002 A. Patent Application No.(s) 29169539 B. Patent No.(s) _____ Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Name and address of party to whom correspondence concerning document should be mailed: Name: ROBIC Internal Address: 55 St-Jacques, Montreal, Quebec, CANADA, H2Y 3X2 Street Address: 55 St-Jacques, Montreal Quebec H2Y 3X2 City: _____ State: _____ Zip: _____	6. Total number of applications and patents involved: <input type="checkbox"/> 7. Total fee (37 CFR 3.41).....\$40.00 <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: _____ (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.*  
 Louis-Pierre GRAVELLE  
 Name of Person Signing  
 No. 44,429  
 Signature:   
 Date: October 22, 2002  
 Total number of pages including cover sheet, attachments, and documents: ☒ 1

Mail documents to be recorded with required cover sheet information to:  
 Commissioner of Patents and Trademarks, Box Assignments  
 Washington, D.C. 20231

**PATENT**  
**REEL: 013414 FRAME: 0634**

ASSIGNMENT

The undersigned **Mario DI GIROLAMO**

whose full post office addresses are (address is) **4070 Place Favreau, Chomedey Laval, Quebec, CANADA, H7T 1T8**

in consideration of one dollar, to us (me) paid by **OPAL LIMITED**

(hereinafter referred as the assignee)

whose full post office address is: **New Moon House, P.O. Box N-1808, Nassau, BAHAMAS**

receipt of which is hereby acknowledged, and other good and valuable considerations, we (I) do hereby sell and assign (and/or confirm such sale and assignment) to the said assignee all our (my) right, title and interest in the United States, Canada and everywhere else throughout the world, in and to our (my) invention entitled **INSOLE**

as fully described and claimed in the application for a patent

☒ which we (I) executed on **OCTOBER 17, 2002**

☐ which was filed on \_\_\_\_\_ under serial number \_\_\_\_\_

and to all our (my) corresponding right, title and interest in and to any patent which may issue therefor in the United States, Canada or elsewhere throughout the world.

We (I) further agree to execute all the Forms and papers that may be necessary to file an original, continuation, divisional or reissue application in the United States, Canada and everywhere else throughout the world, and to extend patent protection on the above invention worldwide in the name of the Assignee. We (I) also agree to communicate to the Assignee or his representatives any facts known to us (me) respecting said invention, make all rightful oaths and generally do everything possible to aid said Assignee, its (his) successors and assigns to obtain and enforce proper protection for said invention in the United States, Canada and everywhere else throughout the world.

The undersigned hereby grant(s) the firm of ROBIC, 55 St-Jacques, Montréal, Québec, CANADA, H2Y 3X2, the power to insert further identification such as the execution date, or the application number and the filing date of the application when known.

It is the express wish of the parties that this Agreement and all related documents be drafted in the English language (c'est la volonté expresse des parties que cette convention et tous les documents

y afférant soient rédigés en langue anglaise).

SIGNED this 17<sup>th</sup> day of Oct. 102  
(day) (month) (year)

at Montreal QC Canada  
(City) (Province) (Country)

WITNESS

Full name:

Christine Sagnon

Mario DI GIROLAMO

# READ AND APPROVED

SIGNED this 17<sup>th</sup> day of Oct. 102  
(day) (month) (year)

at Montreal QC Canada  
(City) (Province) (Country)

By:

OPAL LIMITED

Name: Mario DI GIROLAMO

Title: Executive Vice-President