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3. Nature of conveyance:

- Assignment Merger
- Security Agreement Change of Name
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- Other _____

2. Name and address of receiving party(ies)

Name: Owens-Brockway Glass Container Inc.

Internal Address: _____

Street Address: One SeaGate

City: Toledo

State: Ohio

Country: USA Zip: 43666

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

4. Application or patent number(s):

This document is being filed together with a new application.

A. Patent Application No.(s)

10/631,207 filed 07/31/2003

B. Patent No.(s)

Additional numbers attached? Yes No

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

Name: Susan L. Smith

Internal Address: Owens-Illinois, Inc.

Street Address: One SeaGate, 25-LDP

City: Toledo

State: OH Zip: 43666

Phone Number: 419-247-8699

Fax Number: 419-247-8555

Email Address: _____

6. Total number of applications and patents involved:

1

7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
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9. Signature:

Signature

9-21-2004

Date

Susan L. Smith

Name of Person Signing

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

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