

FORM PTO-1535
1-01-02

RECORDATION FORM COVER SHEET PATENTS ONLY

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

Tab settings

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

1. Name of conveying party(ies):
John T. Richardson

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

3. Nature of conveyance:
 Assignment Merger
 Security Agreement Change of Name
 Other _____

Execution Date: May 23, 2005

2. Name and address of receiving party(ies):
 Name: Pearl Ann Richardson
 Internal Address: _____
 Street Address: 7283 Ashbrook Drive
 City: Brooksville State: FL ZIP: 34601

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

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: _____

A. Patent Application No.(s)
11/121,470

B. Patent No.(s)

Additional numbers attached? Yes No

6. Total number of applications and patents involved: 1


5. Name and address of party to whom correspondence concerning document should be mailed:
 Name: Walter A. Rodgers
 Internal Address: Rodgers & Rodgers
 Street Address: 880 North Island Drive
 City: Atlanta State: GA ZIP: 30327

7. Total fee (37 CFR 3.41):..... \$ 40.00
 Enclosed
 Authorized to be charged to deposit account

8. Deposit account number:
18-1837
 (Attach duplicate copy of this page if paying by deposit account)

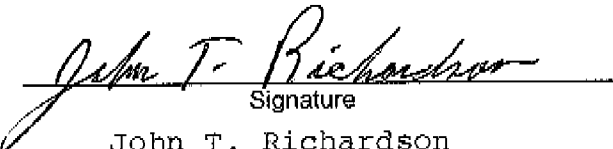
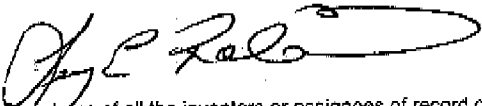
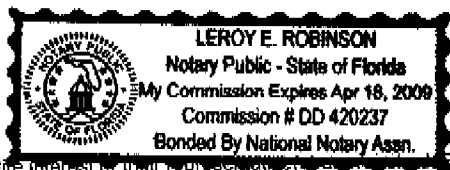
DO NOT USE THIS SPACE

9. Statement and signature.
To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Walter A. Rodgers  June 1, 2005
 Name of Person Signing Signature Date

CH \$40.00 181837 11121470

Sample Form (former PTO/SB/15) (08-03)

ASSIGNMENT OF APPLICATION	Docket Number (Optional) 11390
Whereas, I/We, <u>John T. Richardson</u> of <u>Brooksville, FL 34601</u> hereafter referred to as applicant, have invented certain new and useful improvements in <u>REMOVABLE HANDLES FOR A COOKING UTENSIL</u>	
<input checked="" type="checkbox"/> for which an application for a United States Patent was filed on <u>May 5, 2005</u> Application Number <u>11/121,470</u>	
<input checked="" type="checkbox"/> for which an application for a United States Patent was executed on <u>April 14, 2005</u> , and Whereas, <u>Pearl Ann Richardson</u> of <u>Brooksville, FL 34601</u> here referred to "assignee" whose mailing address is <u>7283 Ashbrook Dr., Brooksville, Fl 34601</u> is desirous of acquiring the entire right, title and interest in the same;	
Now, therefore, in consideration of the sum of <u>ten</u> dollars (\$ <u>10.00</u>), the receipt whereof is acknowledge, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign and transfer unto said assignee the full and exclusive right to the said invention in the United States and the entire rights, title and interest in and to any and all Patents which may be granted therefore in the United States. I/We hereby authorize and request the Director of the U.S. Patent and Trademark Office to issue said United States Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof; and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.	
Executed this <u>23rd</u> day of <u>May</u> , 2005 at <u>Brooksville, Fl 34601</u>	
State of <u>Florida</u> County of <u>Hernando</u>	<div style="text-align: center;">  Signature <u>John T. Richardson</u> Printed Name/Registration No., if applicable </div>
SS: <u>John T. Richardson</u> Before me personally appeared said <u>John T. Richardson</u>	
and acknowledged the foregoing instrument to be his free act and deed this <u>23rd</u> day of <u>May</u> , 2005	
Seal 	
Note: Signatures of all the inventors or assignees of record of the entire interest in their respective parts. Submit multiple forms if more than one signature is required. See below.	
<input type="checkbox"/> Total of _____ forms are submitted.	

This form offers a sample or suggested format for an assignment document. This sample form is not an OMB officially approved form.