| Form PTO-1595 (Rev. 03/05) OMB No. 0651-0027 (exp. 6/30/2005) | 2005 U.S. DEPARTMENT OF COMMERC United States Patent and Trademark C |
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| | ase record the attached documents or the new address(es) below. |
| 1. Name of conveying party(ies) John M. Shingle | Name and address of receiving party(ies) Name: Owens-Illinois Prescription Products Inc. |
| orning. | |
| | Internal Address: |
| Additional name(s) of conveying party(ies) attached? Yes 🗸 N | lo |
| 3. Nature of conveyance/Execution Date(s): | Street Address: One SeaGate |
| Execution Date(s) 5-11-2005 | _ |
| Assignment Merger | |
| Security Agreement Change of Name | City: Toledo |
| Joint Research Agreement | State: Ohio |
| Government Interest Assignment | Country USA |
| Executive Order 9424, Confirmatory License | Country: USA Zip:43666 |
| Other | Additional name(s) & address(es) attached? Yes |
| | |
| Additional numbers a 5. Name and address to whom correspondence | attached? Yes No 6. Total number of applications and patents |
| 5. Name and address to whom correspondence | |
| 5. Name and address to whom correspondence | 6. Total number of applications and patents |
| 5. Name and address to whom correspondence concerning document should be mailed: | 6. Total number of applications and patents involved: 1 |
| 5. Name and address to whom correspondence concerning document should be mailed: Name:Susan L. Smith | 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 |
| 5. Name and address to whom correspondence concerning document should be mailed: Name:Susan L. Smith Internal Address: | 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 Authorized to be charged by credit card |
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| 5. Name and address to whom correspondence concerning document should be mailed: Name: Susan L. Smith Internal Address: Street Address: One SeaGate - 25 LDP City: Toledo State: Ohio Zip:43666 Phone Number: 419-247-8699 | 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 Authorized to be charged by credit card Authorized to be charged to deposit account Enclosed None required (government interest not affecting to a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 15-0875 |
| 5. Name and address to whom correspondence concerning document should be mailed: Name: Susan L. Smith Internal Address: Street Address: One SeaGate - 25 LDP City: Toledo State: Ohio Zip:43666 Phone Number: 419-247-8699 Fax Number: 419-247-8555 | 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40 Authorized to be charged by credit card Authorized to be charged to deposit account Enclosed None required (government interest not affecting ti 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date |
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> PATENT REEL: 016571 FRAME: 0724

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RECORDED: 05/12/2005

ASSIGNMENT

WHEREAS, I, John M. Shingle, of 29845 Oregon Road Apt. 58, Perrysburg, Ohio 43551, U.S.A., have invented an improvement in **Child-Resistant Package, Closure and Container**; and

| WHEREAS, I have executed an Application for United States Patent based thereon, on the |
|---|
| WHEREAS, Owens-Illinois Prescription Products Inc., a corporation of Delaware, of One SeaGate, Toledo, Ohio 43666, U.S.A., is desirous of acquiring certain rights thereunder; |
| NOW, THEREFORE, for One Dollar (\$1.00) and other valuable considerations, receipt of all of which is hereby acknowledged, I have agreed to and do hereby sell, assign, and transfer unto said corporation my entire right, title, and interest in and throughout the United States of America (including its territories and dependencies) and all countries foreign thereto, in and to said invention, said application and any and all patents (including extensions thereof) of any country, which have been or may be granted on said invention or any part thereof, or on said application or any divisional, continuing, renewal, reissue, or other patent application, based in whole or in part thereon, or based upon said invention. |
| TO BE HELD AND ENJOYED by said corporation, its successors and assigns, to the full ends of the respective terms for which said patents or any of them have been or may be granted, as fully and entirely as the same would have been held and enjoyed by me had no sale and assignment of said interest been made; |
| AND I hereby covenant and agree for myself, my heirs, and my legal representatives, to assist my said assignee in the prosecution of said application and in any interference which may arise involving said invention, and, upon request, to execute without further consideration all necessary and desirable divisional, continuing, renewal, reissue, or other applications for patents in any country, that might be deemed necessary by said assignee fully to secure to said assignee its interest as aforesaid in and to said invention or any part thereof, and in and to said several patents or any of them. Further, I hereby authorize the above-mentioned assignee to insert in this instrument the identifying serial number and filing date of my said application when received. |
| AND I do hereby authorize and request the Commissioner of Patents of the United States of America to issue any and all United States patents which may be granted upon said United States applications or any of them, or upon said invention or any part thereof, to said corporation. |
| IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal this 11 day of 2005. |
| STATE OF OHIO) ss: COUNTY OF WOOD) |
| On this //+h day of MAY, 2005, before me, a Notary Public, personally appeared the above-named John M. Shingle, personally known to me and known by me to be the one who executed the foregoing instrument and subscribed the same in my presence, and acknowledged the same to be his free act and deed. |
| SEAL U.S. Serial No Filing Date |
| JUDITH M. SCHREINER Notary Public, State of Ohio Commission Expires 2/2/06 |

PATENT REEL: 016571 FRAME: 0725