Form PTO-1595 (Rev. 03/05) OMB No. 0651-0027 (exp. 6/30/2005)

ş



U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office

PATENT REEL: 017120 FRAME: 0183

т

To the Director of the U.S. Patent and Trademark Office: Plea	se record the attached documents or the new address(es) below.
. Name of conveying party(ies)	2. Name and address of receiving party(ies)
Guoming Li	Name: Husky Injection Molding Systems Ltd. O
	Internal Address:
	40
dditional name(s) of conveying party(ies) attached? Yes ✓ N	
B. Nature of conveyance/Execution Date(s):	Street Address:
Execution Date(s) <u>October 18, 2005</u> √ Assignment	500 Queen Street South
	City: Bolton
Security Agreement Change of Name	
Joint Research Agreement	State: Ontario
Government Interest Assignment	Country: <u>Canada</u> Zip:L7E 5S5
Executive Order 9424, Confirmatory License	
Other	Additional name(s) & address(es) attached? Yes V No
Additional numbers at	tached? Yes ZNo
	tached? Yes INo 6. Total number of applications and patents involved: <u>One</u>
. Name and address to whom correspondence oncerning document should be mailed:	6. Total number of applications and patents involved: One
A Name and address to whom correspondence oncerning document should be mailed: Name: Sandra Hackenberg	6. Total number of applications and patents involved: <u>One</u> 7. Total fee (37 CFR 1.21(h) & 3.41) \$ <u>40.00</u>
A Name and address to whom correspondence oncerning document should be mailed: Name: <u>Sandra Hackenberg</u> nternal Address:	6. Total number of applications and patents involved: One 7. Total fee (37 CFR 1.21(h) & 3.41) Authorized to be charged by credit card
5. Name and address to whom correspondence concerning document should be mailed: Name: <u>Sandra Hackenberg</u> Internal Address: Husky Injection Molding Systems Ltd.	6. Total number of applications and patents involved: <u>One</u> 7. Total fee (37 CFR 1.21(h) & 3.41) \$ <u>40.00</u>
Ame and address to whom correspondence oncerning document should be mailed: Name:Sandra Hackenberg Internal Address: Husky Injection Molding Systems Ltd.	6. Total number of applications and patents involved: One 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
5. Name and address to whom correspondence concerning document should be mailed: Name:Sandra Hackenberg Internal Address: Husky Injection Molding Systems Ltd. Street Address: 500 Queen Street South	6. Total number of applications and patents involved: One 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 □ Enclosed
5. Name and address to whom correspondence concerning document should be mailed: Name:Sandra Hackenberg Internal Address:	6. Total number of applications and patents involved:_One 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 □ Enclosed ○ None required (government interest not affecting title)
5. Name and address to whom correspondence concerning document should be mailed: Name:Sandra Hackenberg Internal Address: Husky Injection Molding Systems Ltd. Street Address: 500 Queen Street South City: Bolton State: Ontario Zip:L7E 5S5	6. Total number of applications and patents involved: One 7. Total fee (37 CFR 1.21(h) & 3.41) ▲ Authorized to be charged by credit card ✓ Authorized to be charged to deposit account ■ Enclosed ■ None required (government interest not affecting title) 8. Payment Information
5. Name and address to whom correspondence concerning document should be mailed: Name:Sandra Hackenberg Internal Address: Husky Injection Molding Systems Ltd. Street Address: 500 Queen Street South City: Bolton State: Ontario Zip:L7E 5S5 Phone Number: 905-951-5000 x 2477	6. Total number of applications and patents involved:_One 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 Enclosed None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers
S. Name and address to whom correspondence concerning document should be mailed: Name:Sandra Hackenberg Internal Address: Husky Injection Molding Systems Ltd. Street Address: 500 Queen Street South City: Bolton State: Ontario Zip:L7E 5S5 Phone Number: 905-951-5000 x 2477	6. Total number of applications and patents involved: One 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 □ Enclosed □ None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 501388
S. Name and address to whom correspondence concerning document should be mailed: Name: Sandra Hackenberg Internal Address:	6. Total number of applications and patents involved: One 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 □ Enclosed □ None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date
Name and address to whom correspondence oncerning document should be mailed: Name:Sandra Hackenberg Internal Address: Husky Injection Molding Systems Ltd. Street Address: 500 Queen Street South Dity: Bolton Strate: Ontario Zip:L7E 5S5 Phone Number: 905-951-5000 x 2477 Tax Number: 905-951-5322	6. Total number of applications and patents involved: One 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 □ Enclosed □ None required (government interest not affecting title) 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 501388

1

10/25/2005 ECOOPER_ 00000259 501388 11254325 40.00 DA

01 FC:8021

-Page 1/1-

ASSIGNMENT HUSKY INJECTION MOLDING SYSTEMS LTD.

For value received, I (we) the undersigned whose full post office address(es) is (are) adjacent my (our) name(s), hereby sell, assign and transfer to HUSKY INJECTION MOLDING SYSTEMS LTD. the address of whose registered office is: 500 Queen Street South, Bolton L7E 5S5, Ontario, Canada (hereinafter called "Husky"). its successors, assigns and legal representatives, the entire right, title and interest, including all rights under and in any and all international conventions and treaties, for all countries in and to certain inventions relating to Apparatus for Cooling Mold Insert identified in Husky's records as H-834 and/or



and all rights and privileges under and in any and all letters patent in all countries that may be granted for and derived from said inventions, with the intent that any such patent (including any division, extension, continuation or reissue) or other intellectual property protection shall be issued to Husky alone for its sole benefit or to its successors, assigns or legal representatives.

I (we) undertake without charge to Husky but at its request and expense to execute all documents, take all oaths and do all reasonable acts to enable Husky, its successors, assigns and legal representatives to procure and maintain patent or other intellectual property protection for said inventions in any and all countries and to vest title thereto in Husky, its successors, assigns or legal representatives.

I (we) agree that a copy of this Assignment shall be deemed a full legal and formal equivalent of any assignment, consent or the like which may be required in any country for any purpose and more particularly in proof of the irrevocable right of Husky, its successors, assigns and legal representatives to apply for and maintain patent or other intellectual property protection for said inventions in any all countries and to claim the benefit of any right or priority.

 $\frac{\text{Grief hi}}{\text{Signature of 1st Invertor/Assignor (above)}} \text{Date: } \frac{\text{Ocf 1}\hat{\mathcal{E}}, 2\cos 5}{(\text{dd-mmm-yyyy})}$

Witness Signature (above line)

Guoming Li Full Name of 1st Inventor/Assignor (print above line) 1st Inventor's Residential Address (print): 586 Galloway Crescent, Mississauga, Ontario L5C 4G6 Canada

Witness Name (print above)

RECORDED: 10/20/2005