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PATENT ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
Michael Gagas	08/23/2006

RECEIVING PARTY DATA

Name:	Adaptor, Inc.	
Street Address:	2151 S. 54th Street	
City:	West Allis	
State/Country:	WISCONSIN	
Postal Code:	53219	

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	29237576

CORRESPONDENCE DATA

Fax Number: (262)783-1211

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: 262 783 1300

Email: lwenzel@rkmiplaw.com

Correspondent Name: Ryan Kromholz & Manion, S.C.

Address Line 1: P.O. Box 26618

Address Line 4: Milwaukee, WISCONSIN 53226-0618

ATTORNEY DOCKET NUMBER:	1239.19372-DES
NAME OF SUBMITTER:	Patrick J. Fleis

Total Attachments: 2

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PATENT REEL: 018158 FRAME: 0719 Form PTO-1595 (Rev. 07/05) OMB No. 0651-0027 (exp. 6/30/2008)

RECORDATION FORM COVER SHEET PATENTS ONLY				
	e record the attached documents or the new address(es) below.			
Name of conveying party(ies)	2. Name and address of receiving party(ies)			
Michael Gagas	Name: Adaptor, Inc.			
	Internal Address:			
`	mornal Addiess.			
Additional name(s) of conveying party(ies) attached? Yes V No				
3. Nature of conveyance/Execution Date(s):	Street Address: 2151 S. 54th Street			
Execution Date(s) 23 August 2006				
Assignment Merger	0.11			
Security Agreement Change of Name	City: West Allis			
Joint Research Agreement	State: WI			
Government Interest Assignment	Country: US Zin: 52210			
Executive Order 9424, Confirmatory License	Country: US Zip: 53219			
Other	Additional name(s) & address(es) attached? Yes Vo			
A. Patent Application No.(s) 29/237,576 Additional numbers att	B. Patent No.(s) ached? ☐ Yes ✓ No			
5. Name and address to whom correspondence	6. Total number of applications and patents			
concerning document should be mailed:	involved: one (1)			
Name: Patrick J. Fleis	7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00			
Internal Address: Ryan Kromholz & Manion, S.C.	✓ Authorized to be charged by credit card			
	Authorized to be charged to deposit account			
Street Address: P.O. Box 26618	Enclosed			
	None required (government interest not affecting title)			
City: Milwaukee	8. Payment Information			
State: WI Zip: 53226-0618	a. Credit Card Last 4 Numbers 3145			
	Expiration Date <u>12/2007</u>			
Phone Number: 262 783 1300	b. Deposit Account Number			
Fax Number: 262 783 1211	Authorized User Name Daniel D. Ryan			
Email Address:				
9. Signature:	23 August 2006			
Signature	Date			
Patrick J. Fleis Name of Person Signing	Total number of pages including cover sheet, attachments, and documents:			

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450

ASSIGNMENT

In consideration of One Dollar (\$1.00) and other good and valuable considerations, receipt of which is acknowledged, I, Michael Gagas, being the lawful owner, hereby sell and assign to Adaptor, Inc., its successors and assigns, the entire right, title and interest throughout the world in my invention entitled Gate Valve Sealing Structure, as described in application Serial No. 29/237,576 filed 1 September 2005, for United States patent, and in this and any and all US and other patent applications and patents thereon, and in all rights of priority thereto.

Signed, sealed and delivered this <u>23</u> day of <u>Agust</u> , 2006.
Michael Fagas
Michael Gagas
STATE OF Wisconsin)
STATE OF Wisconsin) COUNTY OF Waskesha)
Personally came before me this 23 of day of August, 2006 the above named
Michael Gagas personally known to me to be the person who signed the above document, who
acknowledged the same as his own free act and deed.
Notary Public Patrick Fleis My Commission Expires Permanent
My Commission Expires Permanent
[SEAL]

RECORDED: 08/23/2006

PATENT REEL: 018158 FRAME: 0721