| OMB No. 0651-0027 (exp. 6/30/2008)   | 02-28-                  | 2001  | United States Patentario Trademark   |  |  |  |  |
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| To the Director of the U.S. Patent a   | 103376                  | 621   | documents or the new addresses below:  |  |  |  |  |
| 1. Name of conveying party(ies)  |                         |   |  |  |  |  |  |
| PENLLYN LIMITED PARTNERSHIP  |                         | 2. Name and address of receiving party(ies)  Name: SPORTS TRAINING LLC  |  |  |  |  |  |
| ST. MORITZ LIMITED PARTNERSHIP   |                         | Internal Address:   |  |  |  |  |  |
|  |                         |   |  |  |  |  |  |
| Additional name(s) of conveying party(ies) at  |                         |   |  |  |  |  |  |
| 3. Nature of conveyance/Executio   | on Date(s):             | Street Address: 1380 WILMINGTON PIKE  |  |  |  |  |  |
| Execution Date(s) 02/21/2007  Assignment   | Morgor                  |   |  |  |  |  |  |
|  | Merger                  | City: WEST CHESTER  |  |  |  |  |  |
|  | Change of Name          |   |  |  |  |  |  |
| Joint Research Agreement   |                         | State: PENNSYLV   | ANIA   |  |  |  |  |
| Government Interest Assignmer Executive Order 9424, Confirma   | 1                       | Country: U.S.A.   | Zip: 19382   |  |  |  |  |
| Other  |                         |   | ) & address(es) attached? ☐ Yes ✓  |  |  |  |  |
|  |                         |   |  |  |  |  |  |
|  | Additional numbers atta | ached? ☐Yes 🗸   | <sup>7</sup> No  |  |  |  |  |
| 5. Name and address to whom co-<br>concerning document should be   | <del>-</del>            | =   | No r of applications and patents   |  |  |  |  |
|  | rrespondence            | 6. Total number involved: 2   | r of applications and patents  |  |  |  |  |
| concerning document should be  | rrespondence            | 6. Total number involved: 2 7. Total fee (37  |  |  |  |  |  |
| concerning document should be I<br>Name: HOWSON & HOWSON LLP   | rrespondence            | 6. Total number involved: 2  7. Total fee (37  Authorized   | cFR 1.21(h) & 3.41) \$ 80.00   |  |  |  |  |
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| Concerning document should be in Name: HOWSON & HOWSON LLP  Internal Address: SUITE 210  Street Address: 501 OFFICE CENTER D  City: FORT WASHINGTON  State: PA Zip: Phone Number: 215-540-9200  Fax Number: 215-540-5818  Email Address: GASMITH@HOWSONA | PRIVE                   | 6. Total number involved: 2  7. Total fee (37  Authorized  Authorized  Enclosed  None requir  8. Payment Info | count Number 08-3040  To f applications and patents  2   |  |  |  |  |
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Assignors: St. Moritz Limited Partnership

Penllyn Limited Partnership

Assignee: Sports Training LLC

Subject: U.S. Patent 6,942,336

U.S. patent application 11/113796 International Patent application

PCT/US06/15648

## PATENT ASSIGNMENT

WHEREAS, Penllyn Limited Partnership, a partnership of Pennsylvania, having as its address, P. O. Box 286 Spring House, Pennsylvania, 19477, and St. Moritz Limited Partnership, a partnership of Delaware, having as its address, 132 St. Moritz Drive, Centerville, Delaware 19807 (ASSIGNORS herein) are joint owners of the following patent and patent applications:

- U.S. Patent 6,942,336, granted September 13, 2005,
- U.S. patent application 11/113796, filed April 25, 2005, and

International patent application PCT/US06/15648, filed April 25, 2005,

each entitled "TRAINING AID USING VISION RESTRICTION AND METHOD OF USE" and collectively referred to herein as the "Patent and Applications";

WHEREAS ASSIGNORS desire to transfer ownership of the Patent and Applications, and all rights to the inventions described therein to Sports Training LLC, a Pennsylvania Limited Liability Company, having as its address, 1380 Wilmington Pike, West Chester, Pennsylvania 19382 (ASSIGNEE herein), and ASSIGNEE desires to acquire ownership of the Patent and Applications and all rights to the inventions described therein;

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) and other good and valuable consideration given to each of the ASSIGNORS by ASSIGNEE, the receipt of which is hereby acknowledged, ASSIGNORS have sold, assigned and set over, and hereby do sell, assign and set over, unto ASSIGNEE, its successors and assigns, ASSIGNORS' entire right, title and interest for, to and within the United States and all foreign countries, in and to the Patent and Applications, the inventions described therein, and in and to any and all divisions, continuations, national phase applications, reissue

PATENT REEL: 018961 FRAME: 0526 applications, and all other applications claiming any benefit based on the Patent and Applications or any of them, and all letters patent granted or to be granted thereon in the United States and in any and all foreign countries, together with the right to sue and recover for past infringement thereof, and the right to receive any royalties and other compensation that may become due on account thereof after the effective date of this assignment; and

ASSIGNORS further agree to execute any further papers and do such other acts and things as may be necessary and proper to procure Letters Patent for said inventions in the United States and in such foreign countries as ASSIGNEE, its successors and assigns may elect, and vest the full title thereto in ASSIGNEE, its successors and assigns.

IN WITNESS WHEREOF, this assignment has been executed this 2156 day of Farmon, 2007.

PENLLYN LIMITED PARTNERSHIP

ST. MORITZ LIMITED PARTNERSHIP

Name: David S. Foulke
Title: General Partner

Partner

Name: Vincent J. Russomagno

Title: /Gen/eral Part

## ACKNOWLEDGMENT

Commonwealth of Pennsylvania :

ss.:

County of Chester

on this day of February, 2007, before me War worm of the undersigned officer, personally appeared David S. Foulke and Vincent J. Russomagno, known (or satisfactorily proven) to me to be the persons whose names are subscribed to the within instrument and acknowledged that they executed the same for the purposes therein contained.

:

In witness whereof I hereunto set my hand and official

seal.

Notary Public

COMMONWEALTH OF PENNSYLVANIA

Notarial Seal

Marilyn V. Schmidt, Notary Public Birmingham Twp., Chester County My Commission Expires Aug. 31, 2008

Member, Pennsylvania Association Of Notaries

PATENT REEL: 018961 FRAME: 0527

PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number Filing Date TRANSMITTAL First Named Inventor **FORM** Art Unit Examiner Name (to be used for all correspondence after initial filing) Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Provisional Application Proprietary Information After Final Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Assignment and assignment transmittal Request for Refund **Express Abandonment Request** CD, Number of CD(s) \_\_ Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Howson & Howson LLP Signature Printed name ജ്mith, Jr. George A Reg. No. 24.442 Date 02/22/2007 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature 02/22/2007

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≴mith, Jr.

George A.

Typed or printed name

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| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  |                                       |                          |                              | Complete if Known       |               |                         |                              |  |  |  |
| ,  |                                       |                          | Application Num              | ber                     |               |                         |                              |  |  |  |
| FEE TRANSMITTAL For FY 2006  Applicant claims small entity status. See 37 CFR 1.27   |                                       |                          | Filing Date                  |                         |               |                         |                              |  |  |  |
|  |                                       |                          | First Named Inve             | entor                   |               |                         |                              |  |  |  |
|  |                                       |                          | Examiner Name                |                         |               |                         |                              |  |  |  |
| Applicant cla  | aims small entity                     | status. See 3            | 37 CFR 1.27                  | Art Unit                |               |                         |                              |  |  |  |
| TOTAL AMOUN  | T OF PAYMENT                          | (\$)                     | 80.00                        | Attorney Docket         | No.           |                         |                              |  |  |  |
| METHOD OF PAYMENT (check all that apply)   |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| Check Credit Card Money Order None Other (please identify):  |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| Deposit Account Deposit Account Number: 08-3040  Deposit Account Name: Howson & Howson LLP   |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| For the ab   | ove-identified d                      | eposit account           | , the Director is he         | reby authorized to:     | (check all t  | hat apply)              |                              |  |  |  |
| Cha  | arge fee(s) indic                     | ated below               |                              | Charge                  | fee(s) indi   | cated below, <b>exc</b> | cept for the filing fee      |  |  |  |
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| FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)   |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES  |                                       |                          |                              |                         |               |                         |                              |  |  |  |
|  | FI                                    | LING FEES<br>Small E     |                              | RCH FEES Small Entity   |               | ATION FEES Small Entity |                              |  |  |  |
| Application T  | <u>ype Fe</u>                         | (\$) Fee (\$             |                              | Fee (\$)                | Fee (\$)      | Fee (\$)                | Fees Paid (\$)               |  |  |  |
| Utility  | 30                                    | 150                      | 500                          | 250                     | 200           | 100                     |                              |  |  |  |
| Design   | 20                                    | 100                      | 100                          | 50                      | 130           | 65                      |                              |  |  |  |
| Plant  | 20                                    | 100                      | 300                          | 150                     | 160           | 80                      |                              |  |  |  |
| Reissue  | 30                                    | 150                      | 500                          | 250                     | 600           | 300                     |                              |  |  |  |
| Provisional  | 20                                    | 100                      | 0                            | 0                       | 0             | 0                       |                              |  |  |  |
| 2. EXCESS CLAIM FEES  Fee Description Fee (\$) Fee (\$)  |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| <u>Fee Description</u> Each claim over 20 (including Reissues)   |                                       |                          |                              |                         |               | 50                      | 25                           |  |  |  |
| Each indene  | ndent claim o                         | er 3 (includi            | ng Reissues)                 |                         |               | 200                     | 100                          |  |  |  |
| Each independent claim over 3 (including Reissues)  Multiple dependent claims  |                                       |                          |                              |                         |               | 360                     | 180                          |  |  |  |
| Total Claims   |                                       |                          |                              |                         |               |                         | pendent Claims               |  |  |  |
| - 2  | 0 or HP =                             | x _                      | =                            | <del></del>             |               | <u>Fee (\$)</u>         | Fee Paid (\$)                |  |  |  |
| HP = highest number of total claims paid for, if greater than 20.  Indep. Claims   |                                       |                          |                              |                         |               |                         |                              |  |  |  |
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| 3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer lift the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer lift the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer lift the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer lift the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer lift the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer lift the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer lift the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer lift the specific filed sequence or computer lift the specif |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| the 27 CED 1 52(e)) the application size lee due is \$250 (\$125 to stress)  |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| sheets or fraction thereof. See 35 U.S.C. 41(a) (1)(d) and 50 or fraction thereof Fee (\$) Fee Paid (\$)   |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| Total Sheets   Extra Sheets   Figure    |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| 100 = 750  |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) \$80.00  |                                       |                          |                              |                         |               |                         |                              |  |  |  |
| Other (e.g., late filing surcharge): Recordation of Assignment   |                                       |                          |                              |                         |               |                         |                              |  |  |  |
|  |                                       |                          | /                            |                         |               | - (l_                   | 20 1 5 5 10 0000             |  |  |  |
| Registration No. (Attorney/Agent) 24,442   |                                       |                          |                              | Telephone 215-540-9200  |               |                         |                              |  |  |  |
| Signature  |                                       |                          |                              |                         |               | Date 02/                |                              |  |  |  |
| Name (Print/Type)  | George A. Smi                         | in, Jr.                  | , , , , , , , , , , , , , io | required to obtain or I | retain a bene | fit by the public wh    | ich is to file (and by the   |  |  |  |

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