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Our Ref.: LCM-4702-64



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3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Assignment <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other <u>Change of Registered Address</u> Execution Date: September 22, 2006	4. Application number(s) or patent number(s): <input type="checkbox"/> This assignment is being filed together with a new application. A. Patent Application No(s). (1) 11/666,738 (2) (3) B. Patent No(s). (1) (2) (3) Additional numbers attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Leonard C. Mitchard Internal Address: Street Address: Nixon & Vanderhye P.C. 901 North Glebe Road 11th Floor City: Arlington State: VA Zip: 22203	6. Total number of applications & patents involved: 1 7. Total fee (37 CFR 3.41) \$ 40.00 <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account #14-1140 8. The Commissioner is hereby authorized to charge any deficiency in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our Account No. 14-1140.
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4. Application number(s) or patent number(s): <input checked="" type="checkbox"/> This assignment is being filed together with a new application. A. Patent Application No(s). (1) Unassigned (2) (3) Additional numbers attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		B. Patent No(s). (1) (2) (3)	
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Leonard C. Mitchard</u> Internal Address: _____ Street Address: <u>Nixon & Vanderhye P.C.</u> <u>901 North Glebe Road</u> <u>11th Floor</u> City: <u>Arlington</u> State: <u>VA</u> Zip: <u>22203</u>		6. Total number of applications & patents involved: <u>1</u> 7. Total fee (37 CFR 3.41) \$ <u>40.00</u> <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account #14-1140 8. The Commissioner is hereby authorized to charge any <u>deficiency</u> in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our Account No. 14-1140.	

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TO ALL TO WHOM THESE PRESENTS SHALL COME, I
MARK JOHN EVANS of the City of London
NOTARY PUBLIC by royal authority duly admitted and sworn
DO HEREBY CERTIFY that the photographic copy hereunto
annexed is a true copy of the original **change in situation or
address of a registered office** relating to **INEOS EUROPE
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REGISTRATION OFFICE FOR ENGLAND AND WALES
according to law.

IN FAITH AND TESTIMONY WHEREOF I the said notary
have subscribed my name and set and affixed my seal of office
at London aforesaid this twenty ninth day of November two
thousand and six.

