

3/20/08

03-21-2008

Form PTO-1595

(Rev. 10/02)

OMB No. 0651-0027 (exp. 6/30/2005)

Tab settings ⇌ ⇌ ⇌ ▼



103491066

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

To the Honorable Commissioner,

...ed original documents or copy thereof.

## 1. Name of conveying party(ies):

Frederic Ferri

## 2. Name and address of receiving party(ies)

Name: FenF, LLC

Internal Address: \_\_\_\_\_

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

## 3. Nature of conveyance:

☒ Assignment☐ Merger☐ Security Agreement☐ Change of Name☒ Other YPI001Street Address: 1013 Fountain StreetCity: Ann Arbor State: MI Zip: 48103Execution Date: 01/21/2008Additional name(s) & address(es) attached? ☐ Yes ☒ No

## 4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

A. Patent Application No.(s) 10/687,354B. Patent No.(s) 7,131,939Additional numbers attached? ☐ Yes ☒ No

## 5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Cary Tope-McKay

Internal Address: \_\_\_\_\_

Street Address: 23852 Pacific Coast Hwy #311City: Malibu State: CA Zip: 902656. Total number of applications and patents involved: ☐7. Total fee (37 CFR 3.41).....\$ 40.00☒ Enclosed☐ Authorized to be charged to deposit account

## 8. Deposit account number: \_\_\_\_\_

DO NOT USE THIS SPACE

## 9. Signature.

Cary Tope McKay

Name of Person Signing

  
Signature03/14/2008

Date

Total number of pages including cover sheet, attachments, and documents: 6Mail documents to be recorded with required cover sheet information to:  
Commissioner of Patents & Trademarks, Box Assignments  
Washington, D.C. 20231PATENT  
REEL: 020679 FRAME: 0912

ASSIGNMENT

WHEREAS, I, Frederic Ferri of 1013 Fountain Street, Ann Arbor, Michigan, 48103, United States of America (hereinafter "Assignor") have invented certain new and useful improvements in **TOE STRETCHER** (hereinafter "Invention") for which a United States Patent was issued on November 07, 2006, Patent Number 7,131,939.

AND

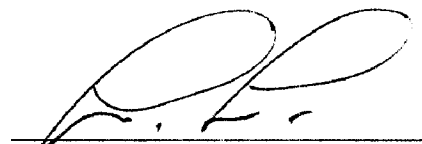
WHEREAS, FenF, LLC, a limited liability company organized and existing under the laws of the State of Michigan, having a place of business at 1013 Fountain Street, Ann Arbor, Michigan, 48103, United States of America, (hereinafter "Assignee"), is desirous of acquiring the entire right, title, and interest in the Invention within the United States of America and its territorial possessions, and in all foreign countries in which intellectual or industrial property protection may be granted therefor, including the right to sue on and collect for any past, present, and future claims of infringement.

NOW, THEREFORE, for good and valuable consideration, the receipt whereof is hereby acknowledged, I, the Assignor desire to and do hereby assign, sell, and transfer unto Assignee the full and exclusive right to the Invention in the United States of America and its territorial possessions and in all foreign countries, including the right to sue on and collect for any past, present, and future claims of infringement, as well as, the entire right, title and interest in and to any and all intellectual or industrial property rights including, but not limited to, Patents, designs, utility models, and inventor certificates which may be granted therefore in the United States of America and its territorial possessions and in all foreign countries, I hereby authorize and request the U.S. Patent Offices and the equivalent offices at foreign countries, to issue to the Assignee, any and all applicable intellectual or industrial property rights in the Invention, for the Assignee's sole use and benefit; and for the use and benefit of his legal representatives, to the full end of the term for which United States and foreign Patents or the like may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

I further covenant and agree with the Assignee that I have a full and unencumbered title to the invention hereby assigned, which title I warrant unto the Assignee, and I further agree that I will, without demanding any further consideration therefore, at the request and at the expense of the Assignee, do all lawful and just acts, including the execution and acknowledgment of instruments, that may be or become necessary for obtaining, sustaining, extending, reissuing or reexamining United States and foreign Patents or the like for the Invention, and for maintaing and perfecting the Assignee's right to the Invention and any and all intellectual or industrial property rights in it, particularly in cases of interference, conflict, opposition and past, present, and future litigation.

IN TESTIMONY WHEREOF, I have hereunto set my hand.

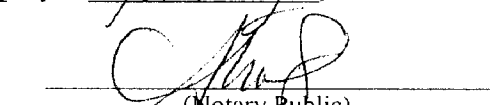
Executed this 21st day of January, 2008,  
at Washtenaw County, State of Michigan

  
(Signature)

State of Michigan ) SS:  
County of Washtenaw )

Before me personally appeared said Frederic Ferri

And acknowledged the foregoing instrument to be his free act and deed this 21st day of January, 2008.

  
(Notary Public)  
JAMES HARRIS, Notary  
NOTARY PUBLIC / WASHINGTON CO., MI  
MY COMMISSION EXPIRES MAY 15, 2010

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.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

6

Application Number

10/687,354

Filing Date

10/17/2003

First Named Inventor

Frederic Ferri

Art Unit

3764

Examiner Name

Lori Baker Amerson

Attorney Docket Number

YPI001

**ENCLOSURES**

(Check all that apply)



Fee Transmittal Form



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Reply to Missing Parts/  
Incomplete ApplicationReply to Missing Parts  
under 37 CFR 1.52 or 1.53

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a  
Provisional Application

Power of Attorney, Revocation



Change of Correspondence Address



Terminal Disclaimer



Request for Refund



CD, Number of CD(s) \_\_\_\_\_



Landscape Table on CD



After Allowance Communication to TC

Appeal Communication to Board  
of Appeals and InterferencesAppeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please identify  
below):Return Receipt Postcard  
Assignment and Recordation Sheet

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

Tope-McKay &amp; Associates

Signature

Printed name

Cary Tope-McKay

Date

03/14/2008

Reg. No.

41,350

**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

Typed or printed name

Cary Tope-McKay

Date

03/14/2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**PATENT****REEL: 020679 FRAME: 0914**

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2008

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 40.00

### Complete if Known

Application Number 10/687,354  
Filing Date 10/17/2003  
First Named Inventor Frederic Ferri  
Examiner Name Lori Baker Amerson  
Art Unit 3764  
Attorney Docket No. YPI001

### METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☐ Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims Extra Claims Fee (\$) Fee Paid (\$)  
- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  
- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  
- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Assignment Recordation Fee

Fees Paid (\$)

\$40

### SUBMITTED BY

Signature \_\_\_\_\_ Registration No. (Attorney/Agent) 41,350 Telephone 310-589-8158  
Name (Print/Type) Cary Tope-McKay Date 03/14/2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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Filing Date 10/17/2003  
First Named Inventor Frederic Ferri  
Examiner Name Lori Baker Amerson  
Art Unit 3764  
Attorney Docket No. YPI001

### METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☐ Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
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Total Claims Extra Claims Fee (\$) Fee Paid (\$)  
- 20 or HP = x =

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  
- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

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PATENT

RECORDED: 03/20/2008

REEL: 020679 FRAME: 0916