Docket No.: MAF-MPGPB-1

FORM PTO-1595 (Modified) RECORDATIO	
(Rev. 03-01)	ON FORM COVER SHEET U.S. DEPARTMENT OF COMMERCE
l '	ENTS ONLY Patent and Trademark Office
	V V V
Table Director of the United States Patent and Tradema	k Office: Please record the attached original documents or copy thereof.
Name of conveying party(ies):	Name and address of receiving party(les):
Mark A. Flannery	2. Name and address of receiving party(ics).
•	Name: Carlson Pet Products, Inc.
	Address: 14198 Commerce Avenue N.E., Suite 500
Additional names(s) of conveying party(ies)	0
3. Nature of conveyance:	
_	The state of the s
☐ Security Agreement ☐ Change of Nam	e City: Prior Lake State/Prov.: MN
☐ Other	Country: <u>U.S.A.</u> ZIP: <u>55372-1439</u>
Execution Date: 08-18-08	Additional name(s) & address(es) ☐ Yes ☒ No
Execution Date: 30 10 00	Additional name(s) & address(es)
4. Application number(s) or patent numbers(s):	
If this document is being filed together with a new applic	cation, the execution date of the application is:
•	B. Patent No.(s)
Patent Application No. Filing date	D. Faterit No.(3)
12/156,373 05/31/2008	5637
	200
	<u> </u>
Additional nur	nbers Yes X No
5. Name and address of party to whom correspondence	C. Total number of applications and natanta involved:
concerning document should be mailed:	
Name: Robert J. Jacobson	
	7 Tatal fee (27 CED 2 44);
	7. Total fee (37 CFR 3.41):\$ 40.00
Registration No. 32,419	D. Facilitated. Any expense or insufficiency should be
	D. Facilitated. Any expense or insufficiency should be
Registration No. 32,419	D. Facilitated. Any expense or insufficiency should be
Registration No. 32,419	□ Enclosed - Any excess or insufficiency should be credited or debited to deposit account □ Authorized to be charged to deposit account
Registration No. 32,419 Address: 650 Brimhall Street South	Enclosed - Any excess or insufficiency should be credited or debited to deposit account Authorized to be charged to deposit account 8. Deposit account number:
Registration No. 32,419	☐ Enclosed - Any excess or insufficiency should be credited or debited to deposit account ☐ Authorized to be charged to deposit account
Registration No. 32,419 Address: 650 Brimhall Street South	Enclosed - Any excess or insufficiency should be credited or debited to deposit account Authorized to be charged to deposit account 8. Deposit account number:
Registration No. 32,419 Address: 650 Brimhall Street South City: St. Paul State/Prov.: MN Country: U.S.A. ZIP: 55116-1511	□ Enclosed - Any excess or insufficiency should be credited or debited to deposit account □ Authorized to be charged to deposit account 8. Deposit account number: 50-3288
Registration No. 32,419 Address: 650 Brimhall Street South City: St. Paul State/Prov.; MN Country: U.S.A. ZIP; 55116-1511	□ Enclosed - Any excess or insufficiency should be credited or debited to deposit account □ Authorized to be charged to deposit account 8. Deposit account number; 50-3288 (Attach duplicate copy of this page if paying by deposit account)
Registration No. 32,419 Address: 650 Brimhall Street South City: St. Paul State/Prov.: MN Country: U.S.A. ZIP: 55116-1511 9. Statement and signature. To the best of my knowledge and belief, the foregoing in	□ Enclosed - Any excess or insufficiency should be credited or debited to deposit account □ Authorized to be charged to deposit account 8. Deposit account number: 50-3288 (Attach duplicate copy of this page if paying by deposit account)
Registration No. 32,419 Address: 650 Brimhall Street South City: St. Paul State/Prov.: MN Country: U.S.A. ZIP: 55116-1511 9. Statement and signature. To the best of my knowledge and belief, the foregoing in of the original document.	Enclosed - Any excess or insufficiency should be credited or debited to deposit account Authorized to be charged to deposit account 8. Deposit account number: 50-3288 (Attach duplicate copy of this page if paying by deposit account) NOT USE THIS SPACE aformation is true and correct and any attached copy is a true copy
Registration No. 32,419 Address: 650 Brimhall Street South City: St. Paul State/Prov.: MN Country: U.S.A. ZIP: 55116-1511 9. Statement and signature. To the best of my knowledge and belief, the foregoing in	□ Enclosed - Any excess or insufficiency should be credited or debited to deposit account □ Authorized to be charged to deposit account 8. Deposit account number; 50-3288 (Attach duplicate copy of this page if paying by deposit account)

PATENT

For: U.S. Rights and Foreign Rights
For: U.S. Application or U.S. Patent

By: Inventor or Owner

ASSIGNMENT OF INVENTION

In consideration of the payment by ASSIGNEE to ASSIGNOR of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

ASSIGNOR:

Mark A. Flannery

Lakeville, MN (residence)

14198 Commerce Avenue N.E., Suite 600 Prior Lake, MN 55372-1439 (postal address)

hereby sells, assigns and transfers to

ASSIGNEE:

RECORDED: 08/25/2008

Carlson Pet Products, Inc.

14198 Commerce Avenue N.E., Suite 500 Prior Lake, MN 55372-1439 (postal address)

and the successors, assigns and legal representatives of the ASSIGNEE the entire right, title, and interest in and to the inventions, patent applications and patents identified below for the United States and its territorial possessions and for all foreign countries, with said entire right, title, and interest including any and all improvements, with said entire right, title, and interest including any legal equivalent thereof in any foreign country, with said entire right, title, and interest including the right to claim priority, and with said right, title, and interest including all additional patent applications and patents including any continuation, division, renewal, or substitute thereof and as to patents any reissue or re-examination thereof:

<u>Title</u> <u>Attorney docket number</u>

Multiple Piece Gated Pressurized Barrier MAF-MPGPB-1

Application Number Filing date
12/156,373 05/31/2008

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment.

ASSIGNOR further covenants that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said invention, patent application, patent, and legal equivalents thereof as may be known and accessible to ASSIGNOR and will testify as to the same in any interference, litigation or proceeding related thereto and will promptly execute and deliver to ASSIGNEE or its legal representatives any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said invention, patent application, patent, and legal equivalents thereof which may be necessary or desirable to carry out the purposes thereof.

IN WITNESS WHEREOF, I have hereunto set hand and seal:

Date: S-18-08 Mark A. Flannery

Inventor

(Assignment dPAVEEDA page 1 of 1)

REEL: 021438 FRAME: 0600