

PATENT ASSIGNMENT

Electronic Version v1.1

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SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	ASSIGNMENT	
CONVEYING PARTY DATA		
Name		Execution Date
Mr. Franco ZOBELE		09/23/2008
RECEIVING PARTY DATA		
Name:	Zobeles Holding SPA	
Street Address:	Via Fersina, 4	
City:	Trento	
State/Country:	ITALY	
Postal Code:	I-38100	
PROPERTY NUMBERS Total: 1		
Property Type	Number	
Application Number:	12294214	
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ATTORNEY DOCKET NUMBER:	080215	
NAME OF SUBMITTER:	Albert Bordas, Esq.	
Total Attachments: 1 source=10AssignmentTransmittal080215#page1.tif		

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REEL: 021574 FRAME: 0189

RECORDATION FORM COVER SHEET PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)

Franco ZOBELE

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

3. Nature of conveyance/Execution Date(s):

Execution Date(s) 09/23/2008

- ☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☐ Joint Research Agreement
☐ Government Interest Assignment
☐ Executive Order 9424, Confirmatory License
☐ Other _____

2. Name and address of receiving party(ies)

Name: Zobe Holding SPA

Internal Address: _____

Street Address: Via Fersina, 4

City: Trento

State: Italy

Country: Italy Zip: I- 38100

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application or patent number(s):

☒ This document is being filed together with a new application.

A. Patent Application No.(s)

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

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

Name: Albert Bordas, P.A.

Internal Address: _____

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6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40

- ☐ Authorized to be charged to deposit account
☒ Enclosed
☐ None required (government interest not affecting title)

8. Payment Information

Deposit Account Number _____

Authorized User Name _____

9. Signature:

/AlbertBordas/
Signature

09/23/2008
Date

Albert Bordas

Name of Person Signing

Total number of pages including cover sheet, attachments, and documents:

1

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
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