| ·   | U.S. PTO<br>12/284256<br>09/19/2008   |
|---|---|
| Form PTO-1595 (Rev. 08/05)<br>OMB No. 0651-0027 (exp. 6/30/2008)  | 0-06-2008   |
|   | т<br>   |
|   | incumente es the new address(as) balance  |
| 1. Name of conveying party(ies)   | 103528135<br>12. Name anu audress of receiving party(ies)   |
| Eric M. Jaeger  | Name: Ironclad Performance Wear   |
| LITC M. Jaeger  | Internal Address:   |
| Additional name(s) of conveying party(ies) attached?  | Yes X No  |
| 3. Nature of conveyance/Execution Date(s  | Street Address: 2201 Park Place,  |
| Execution Date(s) SEPTEMBER 19.   |   |
| Assignment Merger   |   |
| Security Agreement Change   |   |
| Joint Research Agreement  | State: <u>California</u>  |
| Government Interest Assignment  | Country: <u>U.S.A.</u> Zip: 90245   |
| Executive Order 9424, Confirmatory Lice   | inse  |
| 4. Application or patent number(s):   | Additional name(s) & address(es) attached? Yes X N X This document is being filed together with a new application   |
| 5. Name and address to whom correspon   |   |
| concerning document should be mailed:<br>Name: Irving Keschner  | involved:1<br>7. Total fee (37 CFR 1.21(h) & 3.41) \$40   |
| Internal Address:   |   |
|   | Authorized to be charged by credit card   |
| Street Address: 21535 Hawthorne   | Authorized to be charged to deposit account   |
| Sueer Address. 21555 Haw CHOTHE   | Blvd K Enclosed   |
| Suito 285   | Blvd. K Enclosed  |
| Suite 385   | Blvd. K Enclosed  |
| City: <u>Torrance</u>   | B1vd.       Image: Enclosed         Image: None required (government interest not affecting title         8. Payment Information         a. Credit Card       Last 4 Numbers  |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050   | B1vd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card   |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u>  | B1vd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card       Last 4 Numbers  |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u><br>Fax Number: <u>310-543-0492</u>   | B1vd.       Image: Enclosed         Image: None required (government interest not affecting title         8. Payment Information         a. Credit Card       Last 4 Numbers         Build Structure         Build Struct   |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u><br>Fax Number: <u>310-543-0492</u><br>Email Address: <u>IrvKesch@ag1.com</u>   | B1vd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card       Last 4 Numbers         Build Structure         Authorized User Name   |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u><br>Fax Number: <u>310-543-0492</u><br>Email Address: <u>IrvKesch@do1.com</u><br>9. Signature:  | Blvd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card       Last 4 Numbers         Build and the series         Build and the series< |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u><br>Fax Number: <u>310-543-0492</u><br>Email Address: <u>IrvKesch@do1.com</u><br>9. Signature:  | B1vd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card       Last 4 Numbers         Build Structure         Authorized User Name   |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u><br>Fax Number: <u>310-543-0492</u><br>Email Address: <u>IrvKesch@a@1.com</u><br>9. Signature: <u>Sig</u>   | B1vd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card Last 4 Numbers         Expiration Date         b. Deposit Account Number         Authorized User Name         September 19, 200         nature       Date         Total number of pages including cover   |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u><br>Fax Number: <u>310-543-0492</u><br>Email Address: <u>IrvKesch@dø1.com</u><br>9. Signature: <u>Sig</u><br>Irving Keschner<br>Name of Person Sig<br>Documents to be recorded (Include   | B1vd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card Last 4 Numbers         Expiration Date         b. Deposit Account Number         Authorized User Name         September 19, 200         nature       Date         Total number of pages including cover         2         Ing cover sheet) should be faxed to (571) 273-0140, or mailed to:   |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u><br>Fax Number: <u>310-543-0492</u><br>Email Address: <u>IrvKesch@dol.com</u><br>9. Signature: <u>Sig</u><br>Irving Keschner<br>Name of Person Sig<br>Documents to be recorded (inclust<br>Mail Stop Assignment Recordation Serve | B1vd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card Last 4 Numbers         Expiration Date         b. Deposit Account Number         Authorized User Name         September 19, 200         nature       Date         Total number of pages including cover       2         ning       Sheet, attachments, and documents:   |
| City: <u>Torrance</u><br>State: <u>California</u> Zip: 9050<br>Phone Number: <u>310-543-5200</u><br>Fax Number: <u>310-543-0492</u><br>Email Address: <u>IrvKesch@døl.com</u><br>9. Signature: <u>Sig</u><br>Irving Keschner<br>Name of Person Sig<br>Documents to be recorded (Include   | B1vd.       Enclosed         None required (government interest not affecting title         8. Payment Information         a. Credit Card Last 4 Numbers         Expiration Date         b. Deposit Account Number         Authorized User Name         September 19, 200         nature       Date         Total number of pages including cover         2         Ing cover sheet) should be faxed to (571) 273-0140, or mailed to:   |

PATENT REEL: 021645 FRAME: 0313 WHEREAS, I, Eric M. Jaeger of El Segundo, California, have invented a new GLOVE FOR USE IN THE OIL AND NATURAL GAS EXTRACTION INDUSTRIES for which an application for United States Letters Patent filed concurrently herewith; and

WHEREAS, IRONCLAD PERFORMANCE WEAR CORP., a business entity having its principal place of business at 2201 Park Place, Suite 101, El Segundo, California 90245, is desirous of acquiring the entire and exclusive right, title, and interest in and to the said invention and in and to any Letters Patent which may be granted and issued therefore in the United States and throughout the world,

NOW, THEREFORE, in consideration of the sum of TEN DOLLARS (\$10.00) to me in hand paid, and other good and valuable consideration, the receipt of which is hereby acknowledged, L the said Eric M. Jaeger, by these presents, do hereby sell, assign, transfer, and set over unto the said IRONCLAD PERFORMANCE WEAR CORP., its successors and assigns, my entire and exclusive right, title, and interest in and to the said invention, in the United States and throughout the world, and in and to any Letters Patent which may be granted and issued therefor.

And I hereby authorize and request the Commissioner of Patents and Trademarks to issue the said United States Letters Patent to the said IRONCLAD PERFORMANCE WEAR CORP., its successors and assigns.

formwiassign.Lacger