

Form PTO-1595 (Rev. 07/05)
OMB No. 0651-0027 (exp. 6/30/2008)

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

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) <u>Jean-Luc Noiray</u> Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies) Name: <u>Chee Leong Wong</u> Internal Address: _____ Street Address: <u>11331 Elliot Avenue, #8</u> City: <u>EL MONTE</u> State: <u>CA</u> Country: <u>USA</u> Zip: <u>91732</u> Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
3. Nature of conveyance/Execution Date(s): Execution Date(s) <u>03/28/2007</u> <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Joint Research Agreement <input type="checkbox"/> Government Interest Assignment <input type="checkbox"/> Executive Order 9424, Confirmatory License <input type="checkbox"/> Other _____	4. Application or patent number(s): <input type="checkbox"/> This document is being filed together with a new application. A. Patent Application No.(s) <u>5,893,493</u> B. Patent No.(s) _____ Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Name and address to whom correspondence concerning document should be mailed: Name: <u>Chee Leong Wong</u> Internal Address: _____ Street Address: <u>11331 Elliott Avenue, #8</u> City: <u>EL MONTE</u> State: <u>CA</u> Zip: <u>91732</u> Phone Number: _____ Fax Number: _____ Email Address: <u>support@wescript.com</u>	6. Total number of applications and patents involved: _____ 7. Total fee (37 CFR 1.21(h) & 3.41) \$ PAID <input type="checkbox"/> Authorized to be charged by credit card <input type="checkbox"/> Authorized to be charged to deposit account <input type="checkbox"/> Enclosed <input type="checkbox"/> 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 _____	
9. Signature: <u>Jean-Luc Noiray</u> 10-8-08 <div style="display: flex; justify-content: space-between;"> Signature Date </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> JEAN - LUC NOIRAY Total number of pages including cover sheet, attachments, and documents: <input type="checkbox"/> </div> <div style="display: flex; justify-content: space-between;"> Name of Person Signing </div>	

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450

Sample Form (former PTO/SB/41) (05-01)

ASSIGNMENT OF PATENT	Docket Number (optional)
-----------------------------	--------------------------

Whereas, I, JEAN-LUC NOIRAY of NEWBURY PARK, CA, hereinafter referred to as patentee, did obtain a United States Patent for an improvement in FOLDABLE CLOTHES HANGER

No. 5893493, dated 04/13/1999; and whereas, I am now the sole owner of said patent, and,

Whereas, CHEE LEONG WONG

of EL MONTE, CA

hereinafter referred to as "assignee" whose mailing address is 11331 ELLIOTT AVE., #8

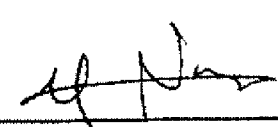
City of EL MONTE, and State of CALIFORNIA

is desirous of acquiring the entire right, title and interest in the same;


Now, therefore, in consideration of the sum of Six Thousand dollars (\$ 6,000), the receipt whereof is acknowledged, and other good and valuable consideration, I, the patentee, by these presents do sell, assign and transfer unto said assignee the entire right, title and interest in and to the said Patent aforesaid; the same to be held and enjoyed by the said assignee for his own use and behoof, and for his legal representatives and assigns, to the full end of the term for which said Patent is granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

Executed this 28th day of March, 2007

at NEWBURY PARK, CALIFORNIA


 (Signature)

State of _____
 County of _____ SS:
 Before me personally appeared said _____
 and acknowledge the foregoing instrument to be his free act and deed this _____ day
 of _____, 20_____.


 MALA COMM. VENTUR
 NOTARY PUBLIC
 My Comm. Expires NOVEMBER

SEE ATTACHED
 (Notary Public)

Seal

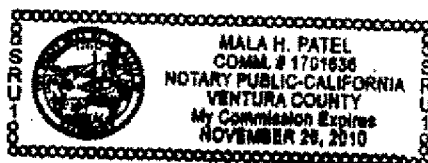
This form offers a sample or suggested format for an assignment document. This sample form is not an OMB officially approved form.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENTState of CALIFORNIACounty of VENTURAOn 3-28-2007 before me, MALA H PATEL, NOTARY

PUBLIC

personally appeared JEAN-LUC NOIRAY

☐ personally known to me - OR - ☒ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Mala H. Patel

Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached DocumentTitle or Type of Document: ASSIGNMENT OF PATENT, # 5893493Document Date: 3-28-2007 Number of Pages: 1

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)Signer's Name: JEAN-LUC NOIRAY

Signer's Name: _____

☒ Individual☐ Corporate Officer

Title(s): _____

☐ Partner — ☐ Limited ☐ General☐ Attorney-in-Fact☐ Trustee☐ Guardian or Conservator☐ Other: _____

Signer Is Representing:

SELF☐ Individual☐ Corporate Officer

Title(s): _____

☐ Partner — ☐ Limited ☐ General☐ Attorney-in-Fact☐ Trustee☐ Guardian or Conservator☐ Other: _____

Signer Is Representing: