

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Mr. Lawrence Henry DeSeguirant Jr.	01/13/2009
RECEIVING PARTY DATA	
Name:	Pet Lane Inc.
Street Address:	2291 Via De Mercados
Internal Address:	Suite E
City:	Concord
State/Country:	CALIFORNIA
Postal Code:	94520
PROPERTY NUMBERS Total: 2	
Property Type	Number
Application Number:	29280942
Application Number:	29280854
CORRESPONDENCE DATA	
Fax Number:	(510)217-6844
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	510-841-4711
Email:	tony@phdpatents.com
Correspondent Name:	Steven R. Vosen
Address Line 1:	1563 Solano Ave.
Address Line 2:	#206
Address Line 4:	Berkeley, CALIFORNIA 94707
ATTORNEY DOCKET NUMBER:	PET.009US
NAME OF SUBMITTER:	Steven R. Vosen
Total Attachments: 2	
source=PET010RecordationCoverSheet#page1.tif	

OP \$80.00 29280942

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PATENT
REEL: 022105 FRAME: 0509

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)

Lawrence Henry DeSeguirant, Jr.

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

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

Execution Date(s) January 13, 2009

- ☒ 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: Pet Lane, Inc.

Internal Address: Suite E

Street Address: 2291 Via De Mercados

City: Concord

State: CA

Country: US Zip: 94520

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)

29/280,854

29/280,942

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

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

Name: Steven R. Vosen, Ph.D.

Internal Address: #206

Street Address: 1563 Solano Ave.

City: Berkeley

State: CA Zip: 94707

Phone Number: 510-841-4711

Fax Number: 510-217-6844

Email Address: svosen@phdpatents.com

6. Total number of applications and patents involved: 2

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

- ☐ Authorized to be charged by credit card
☐ Authorized to be charged to deposit account
☐ 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 _____

9. Signature:

\Steven R. Vosen\

Signature

January 13, 2009

Date

Steven R. Vosen

Name of Person Signing

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

3

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Credit Card Expiration Date: 05/09

Name as it Appears on Credit Card: Steven R. Vosen

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Credit Card Billing Address

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Street Address 2:

City: Berkeley

State/Province: CA

Zip/Postal Code: 94707

Country: U.S.

Daytime Phone #: 510-841-4711

Fax #: 510-217-6844

Request and Payment Information

Description of Request and Payment Information:

Assignment Fee for Application No.s 29/280,854; 29/280,942

<input type="checkbox"/> Patent Fee	<input type="checkbox"/> Patent Maintenance Fee	<input type="checkbox"/> Trademark Fee	<input checked="" type="checkbox"/> Other Fee
Application No.	Application No.	Application No.	IDON Customer No. 40280
Patent No.	Patent No.	Registration No.	
Attorney Docket No.		Identify or Describe Mark	

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