PATENT ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
Rita Zine	02/09/2009

RECEIVING PARTY DATA

Name:	Worldwise Inc.
Street Address:	160 Mitchell Blvd.
City:	San Rafael
State/Country:	CALIFORNIA
Postal Code:	94903

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	29332149

CORRESPONDENCE DATA

Fax Number: (415)226-1883

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Address Line 4: San Francisco, CALIFORNIA 94111

ATTORNEY DOCKET NUMBER: 545.173

NAME OF SUBMITTER: J William Wigert

Total Attachments: 3 source=173assn#page1.tif source=173assn#page2.tif source=173assn#page3.tif

> PATENT REEL: 022233 FRAME: 0888

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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)	2. Name and address of receiving party(ies)		
	Name:Worldwise Inc.		
RITA ZINE	Internal Address:		
Additional name(s) of conveying party(ies) attached? Yes X No 3. Nature of conveyance/Execution Date(s): Execution Date(s)	Street Address: 160 Mitchell Blvd.		
Assignment Merger	Others and I		
Security Agreement Change of Name	City: <u>San Rafael</u>		
Joint Research Agreement	State:ca		
Government Interest Assignment	Country: US Zip:94903		
Executive Order 9424, Confirmatory License			
Other 4. Application or patent number(s):	Additional name(s) & address(es) attached? Yes No document is being filed together with a new application		
Additional numbers at	ached? Yes XNo		
5. Name and address to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved: 1		
Name Bay Area Technology Law Group PC	7. Total fee (37 CFR 1 21(h) & 3.41) \$40.00		
Internal Address:	77 Total 100 (07 01 K 1 2 Kiny & 0.41)		
	Authorized to be charged to deposit account		
Street Address: 500 Sansome Street, Suite 404	X Enclosed		
	None required (government interest not affecting title)		
City: San Francisco	8. Payment Information		
State:CA Zip94111			
Phone Number:415-868-4072	Denegit Appayant Niveshar		
Fax Number: 415-226-1883	Deposit Account Number		
Email Address: tnelmark@batechlaw.com	Authorized User Name		
9. Signature: /j william wigert/	2-10-2009		
Signature	Date		
J William Wigert Name of Person Signing	Total number of pages including cover sheet, attachments, and documents:		

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

Patent Appl No : not yet filed

ASSIGNMENT

WHEREAS, Rita Zine, hereinafter referred to as "ASSIGNOR", is the owner of certain new and useful improvements as described and set forth in the below-identified United States patent:

WHEREAS, Worldwise, Inc., hereinafter referred to as "ASSIGNEE", is desirous of acquiring the entire right, title

Title of Invention: PET BED

Date of Execution: 2/09/09 Issue Date: Not yet filed.

and interest in and to said invention and application and in any I etters Patent which may be granted on the same; NOW, THEREFORE, TO ALL WHOM IT MAY CONCERN: Be it known that, for One Dollar (\$1 00) and other good and valuable considerations, receipt of which is hereby acknowledged by Assignor, Assignor has sold, assigned and transferred, and by these presents does sell, assign and transfer unto the said Assignee, and Assignee's successors and assigns, all right, title and interest in and to the said invention, said application for United States Letters Patent, and any Letters Patent which may hereafter be granted on the same in the United States and all countries throughout the world including any divisions, renewals, continuations in whole or in part, substitutions, conversions, reissues, prolongations or extensions thereof, said interest to be held and enjoyed by said Assignee as fully and exclusively as it would have been held and enjoyed by said Assignors had this assignment and transfer not been made, to the full end and term of any such Letters Patent Assignor further agrees that they will, without charge to said Assignee, but at Assignee's expense, cooperate with Assignee in the prosecution of said application and/or applications, execute, verify, acknowledge and deliver all such further papers, including applications for Letters Patent and for the reissue thereof, and instruments of assignment and transfer thereof, and will perform such other acts as Assignee lawfully may request, to obtain or maintain Letters Patent for said invention and improvement in any and all countries, and to yest title thereto in said Assignee, or Assignee's successors and assigns IN TESTIMONY WHEREOF, Assignor has hereunto signed her name to this assignment on the date indicated below Date: 2/09, 2009 COUNTY OF On this _______ in the year of 2009, before me, the undersigned notary public, personally appeared the above-named assignor, or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same in his authorized capacity and that by his signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument Witness my hand and official seal

Notary Public

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

	- ITELITY E
State of California	
County of MARID	
On 2/09/09 before me, 740, personally appeared 2)	Mere insert name and title of the officer) A 2/WE
the within instrument and acknowledged to me the	ence to be the person(s) whose name(s) is/are subscribed to at he/she/they executed the same in his/her/their authorized on the instrument the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY under the is true and correct	e laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal?	THOM O'BRIEN Commission # 1782116 Notary Public California & San Francisco County My Comm. Express Dec 25, 2011
	(Notary Seal)
Signature of Notary Public	. (county county
A DEDITIONAL OF	
ADDITIONAL OF	PTIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT	INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document The only exception is if a document is to be recorded outside of California. In such instances, any alternative
(Title or description of altached document)	acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the country).
(Title or description of attached document continued):	document carefully for proper notarial wording and attach this form if required.
Number of Pages Document Date	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment Date of notarization must be the date that the signer(s) personally appeared which
(Additional information)	must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary middle).
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CAPACITY CLAIMED BY THE SIGNER	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/hey, is /are) or circling the correct forms. Failure to correctly indicate this
☐ Individual (s) ☐ Corporate Officer	no anciency. Is take you chang the correct forms. Failure to correctly indicate this
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	The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines If seal impression must not cover text or lines. If seal impression must not cover text or lines. If seal impression must not cover text or lines.
(Title)	 The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different ast powled ment forcil.
(Title) □ Partner(s)	 The notary seal impression must be clear and photographically reproducible, impression must not cover text or times. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the effice of the county clerk.
(Title) Partner(s) Attorney-in-Fact	 The notary seal impression must be clear and photographically reproducible, impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the effice of the county clerk. Additional information is not required, but could belo to enough this.
(Title) □ Partner(s) □ Attorney-in-Fact	 The notary seal impression must be clear and photographically reproducible, impression must not cover text or times. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the effice of the county clerk.

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RECORDED: 02/10/2009

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