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RECORDATION FORM
PATENTS

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)

CESARE PACIOTTI

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

2. Name and address of receiving party(ies)
Name: CESPA S.R.L.
Internal Address: Strada Provinciale Santa Maria
delle Vergini
Street Address: SNC Frazione Alta Zona Industriale B

City: CIVITANOVA MARCHE
State: (MC)
Country: ITALY Zip: 62012

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

3. Nature of conveyance/Execution Date(s):
Execution Date(s) 16 August 2010
 Assignment Merger
 Security Agreement Change of Name
 Joint Research Agreement
 Government Interest Assignment
 Executive Order 9424, Confirmatory License
 Other _____

4. Application or patent number(s): This document is being filed together with a new application.
A. Patent Application No.(s)

Additional numbers attached? Yes No

B. Patent No.(s)

29 370 879

5. Name and address to whom correspondence concerning document should be mailed:
Name: Robert M. Gamson, Esquire
Internal Address: HODES, PESSIN & KATZ, P.A.

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6. Total number of applications and patents involved: one (1)
7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00
 Authorized to be charged to deposit account
 Enclosed
 None required (government interest not affecting title)

8. Payment Information
Deposit Account Number 503879
Authorized User Name Robert M. Gamson

9. Signature: Robert M. Gamson Signature Aug 16, 2010 Date
Robert M. Gamson
Name of Person Signing
Total number of pages including cover sheet, attachments, and documents: 2

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

ASSIGNMENT OF APPLICATION

Docket Number (Optional) 024783.559

Whereas, I/We, Cesare of Civitanova Marche ITALY, hereafter referred to as applicant, have invented certain new and useful improvements in LACE PATTERN SOLE FOR FOOTWEAR

[X] for which an application for a United States Patent was filed on concurrently herewith Application Number

[] for which an application for a United States Patent was executed on and

Whereas, CESPÀ S.R.L. of Civitanova Marche (MC) ITALY here referred to "assignee" whose mailing address is Strada Provinciale Santa Maria delle Vergini is SNC Frazione Alta Zona Industriale B, 62012 desirous of acquiring the entire right, title and interest in the same; Civitanova Marche (MC), ITALY

Now, therefore, in consideration of the sum of one dollars (\$ 1.00), the receipt whereof is acknowledge, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign and transfer unto said assignee the full and exclusive right to the said invention in the United States and the entire rights, title and interest in and to any and all Patents which may be granted therefore in the United States. I/We hereby authorize and request the Director of the U.S. Patent and Trademark Office to issue said United States Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof; and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

16 AGO. 2010

Executed this day of , 20

at

[Signature] Signature

State of) Casare Paciotti

County of) SS: Printed Name/Registration No., if applicable

Before me personally appeared said

and acknowledged the foregoing instrument to be his free act and deed this

day of , 20

Seal

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

Total of forms are submitted.

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