

PATENT ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	RELEASE BY SECURED PARTY
CONVEYING PARTY DATA	
Name	Execution Date
Edward A Kidston	09/14/2011
RECEIVING PARTY DATA	
Name:	Pure Water Global, Inc.
Street Address:	15101 Surveyor Blvd.
City:	Addison
State/Country:	TEXAS
Postal Code:	75001
PROPERTY NUMBERS Total: 1	
Property Type	Number
Patent Number:	6153096
CORRESPONDENCE DATA	
Fax Number:	(212)258-2291
Phone:	212-641-2279
Email:	zhang@fr.com
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>	
Correspondent Name:	Tony Zhang
Address Line 1:	601 Lexington Avenue
Address Line 4:	New York, NEW YORK 10022
ATTORNEY DOCKET NUMBER:	35850-0013001
NAME OF SUBMITTER:	Melvin Smith
Total Attachments: 4 source=358500013001Assignment1#page1.tif source=358500013001Assignment1#page2.tif source=358500013001Assignment1#page3.tif source=358500013001Assignment1#page4.tif	

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PATENT

STATE OF NEVADA



ROSS MILLER
Secretary of State

SCOTT W. ANDERSON
Deputy Secretary
for Commercial Recordings

OFFICE OF THE
SECRETARY OF STATE

Filing Acknowledgement

September 14, 2011

Job Number

U20110914-0091

Initial Filing Number

2010005387-6

Filing Description

Termination

Document Filing Number

2011024371-8

Date/Time of Filing

09-14-2011 01:40 PM

Debtors

PURE WATER GLOBAL, INC.
15101 SURVEYOR BLVD.
ADDISON TX 75001

Secured Parties

KIDSTON, EDWARD A.
600 WEST MICHIGAN ST.
PIONEER OH 43554

KIDSTON CONSULTANTS, LTD.
600 WEST MICHIGAN ST.
PIONEER OH 43554 USA

The attached document(s) were filed with the Nevada Secretary of State, Uniform Commercial Code Division. The filing date and time have been affixed to each document, indicating the date and time of filing. A filing number is also affixed and can be used to reference this document in the future.

Nevada Secretary of State
Electronic Filing
Filing Officer

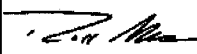
UCC DIVISION:
Tracy Gillespie, Supervisor
200 N. Carson Street
Carson City, Nevada 89701-4069
Telephone (775) 684-5708
Fax (775) 684-5630

PATENT
REEL: 027586 FRAME: 0049

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
TERRY MOORE	513-381-0656
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
TERRY MOORE KOHNEN & PATTON LLP 201 E. FIFTH ST. SUITE 800 CINCINNATI, OH 45224	

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number
	2011024371-8
	Filing Date and Time
	09/14/2011 1:40 PM

(This document was filed electronically.)
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #	1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS.
2010005387-6	<input type="checkbox"/>

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. **ASSIGNMENT** (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. **AMENDMENT (PARTY INFORMATION):** This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes.
 Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.

CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party. **DELETE** name: Give record name to be deleted in item 6a or 6b. **ADD** name: Complete item 7a or 7b, and also item 7c; also complete items 7e-7g (if applicable).

6. **CURRENT RECORD INFORMATION:**

6a. ORGANIZATION'S NAME

OR

6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7. **CHANGED (NEW) OR ADDED INFORMATION:**

7a. ORGANIZATION'S NAME

OR

7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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7d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any
				<input type="checkbox"/> NONE

8. **AMENDMENT (COLLATERAL CHANGE):** check only one box.
 Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT** (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of **DEBTOR** authorizing this Amendment.

9a. ORGANIZATION'S NAME

KIDSTON CONSULTANTS, LTD.

OR

9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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10. **OPTIONAL FILER REFERENCE DATA**

KI044 GB001

Uniform Commercial Code
P.O. Box 13193
Austin, Texas 78711-3193



Hope Andrade
Secretary of State

Office of the Secretary of State

September 14, 2011

Page 1 of 1

Terry E. Moore
Attn:
800 PNC Center
201 E. Fifth Street
Cincinnati, OH 45202 -

Filing Fee: \$5.00

Total Filing Fee: \$5.00

Re: **Texas UCC Amendment Filing Acknowledgment**

—
The Texas Secretary of State's Office has received and filed your document. The information below reflects the data that was indexed into our system.

Initial Filing Type: **Financing Statement**

Amendment Filing Number: **11-00270329**

Initial Filing Number: **09-0032215133**

Filing Date: **09/14/2011**

Filing Time: **3:48 p.m.**

Lapse Date: **11/19/2014**

Document Number: **388711720002**

Amendment Type: **Termination**

Please feel free to contact us at 512-475-2703 if you have any questions regarding the above information.

User ID: WEBSUBSCRIBER

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Terry E. Moore (513) 381-0656
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Terry E. Moore 800 PNC Center 201 E. Fifth Street Cincinnati, OH 45202 USA

FILING NUMBER: 11-00270329
FILING DATE: 09/14/2011 03:48 PM
DOCUMENT NUMBER: 388711720002
FILED: Texas Secretary of State
IMAGE GENERATED ELECTRONICALLY FOR WEB FILING
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 09-0032215133		1b. <input type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.			
2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination.					
3. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.					
4. <input type="checkbox"/> ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.					
5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these. Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in items 6 and/or 7. <input type="checkbox"/> CHANGE name and/or address: Give current record name in item 6; also give new name and/or new address in item 7. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c.					
6. CURRENT RECORD INFORMATION:					
6a. ORGANIZATION'S NAME					
OR	6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:					
7a. ORGANIZATION'S NAME					
OR	7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
7d. TAX ID#: SSN OR EIN	ADD'L DEBTOR INFO	7e. TYPE OF ORGANIZATION	7f. ORG JURISDICTION	7g. ORG. ID #, if any <input type="checkbox"/> NONE	
8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. Describe collateral <input checked="" type="checkbox"/> No change <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this amendment.					
9a. ORGANIZATION'S NAME Kidston Consultants, Ltd.					
OR	9b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA KI044 GB001 Texas UCC Termination					

FILING OFFICE COPY

RECORDED: 01/24/2012

PATENT
REEL: 027586 FRAME: 0052