

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT2880070

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	SECURITY INTEREST TERMINATION
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
KNOBBE, MARTENS, OLSON & BEAR, LLP	04/01/2014
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	RADICAL CONCEPT PRODUCTS, INC.
<b>Street Address:</b>	12705 S. VAN NESS
<b>City:</b>	HAWTHORNE
<b>State/Country:</b>	CALIFORNIA
<b>Postal Code:</b>	90250
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
Application Number:	12234370
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(949)760-9502
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>	
<b>Phone:</b>	(949) 760-0404
<b>Email:</b>	MICHELL.DO@KNOBBE.COM
<b>Correspondent Name:</b>	KNOBBE, MARTENS, OLSON & BEAR, LLP
<b>Address Line 1:</b>	2040 MAIN STREET
<b>Address Line 2:</b>	14TH FLOOR
<b>Address Line 4:</b>	IRVINE, CALIFORNIA 92614
<b>ATTORNEY DOCKET NUMBER:</b>	RCPRD.UCC3
<b>NAME OF SUBMITTER:</b>	STEVEN J. NATAUPSKY
<b>SIGNATURE:</b>	/Steven J. Nataupsky/
<b>DATE SIGNED:</b>	06/02/2014
<b>Total Attachments: 1</b>	
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# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

**A. NAME & PHONE OF CONTACT AT FILER [optional]**  
MICHELL T DO  
(949) 760-0404

**B. SEND ACKNOWLEDGMENT TO: (Name and Address)**  
Knobbe, Martens, Olson & Bear, LLP  
2040 Main Street, 14th Floor  
Irvine, CA 92614  
USA

DOCUMENT NUMBER: 42362860002  
FILING NUMBER: 14-74054617  
FILING DATE: 04/01/2014 10:15  
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**1a. INITIAL FINANCING STATEMENT FILE #**  
10-7222982811

**1b.**  This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.

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

**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. 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

**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. SEE INSTRUCTIONS**      **ADD'L DEBTOR INFO**      **7e. TYPE OF ORGANIZATION**      **7f. JURISDICTION OF ORGANIZATION**      **7g. ORGANIZATIONAL ID#, if any**  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 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.

**a. ORGANIZATION'S NAME**  
Knobbe, Martens, Olson & Bear, LLP  
OR  
**b. INDIVIDUAL'S LAST NAME**      **FIRST NAME**      **MIDDLE NAME**      **SUFFIX**

**10. OPTIONAL FILER REFERENCE DATA**  
RCPRD - UCC3

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