### 503289632 05/01/2015

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT3336250

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

#### **CONVEYING PARTY DATA**

Name	Execution Date
ANDREW J MACKINNON	04/01/2015
ANDREW JAMES GARCIA	04/01/2015
MARINKO JELIC	04/01/2015
DICK AMEN	04/01/2015

#### **RECEIVING PARTY DATA**

Name:	JELIGHT COMPANY, INC.
Street Address:	2 MASON
City:	IRVINE
State/Country:	CALIFORNIA
Postal Code:	92618

#### **PROPERTY NUMBERS Total: 1**

Property Type	Number
Application Number:	14630598

### **CORRESPONDENCE DATA**

**Fax Number:** (310)397-9158

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.

**Phone:** 3103979118

Email: steve@smyrski.com
Correspondent Name: STEVEN W. SMYRSKI

Address Line 1: SMYRSKI LAW GROUP, A P.C. Address Line 2: 3310 AIRPOR AVENUE, SW

Address Line 4: SANTA MONICA, CALIFORNIA 90405

ATTORNEY DOCKET NUMBER:	JEL10004
NAME OF SUBMITTER:	STEVEN W. SMYRSKI
SIGNATURE:	/Steven W. Smyrski, Reg. No. 38,312/
DATE SIGNED:	05/01/2015

## **Total Attachments: 9**

source=JELI0004\_Assignment\_All\_Inventors\_Signed\_042715#page1.tif source=JELI0004\_Assignment\_All\_Inventors\_Signed\_042715#page2.tif

PATENT 503289632 REEL: 035547 FRAME: 0970



PATENT REEL: 035547 FRAME: 0971 Please return signed/recorded to: Smyrski Law Group, APC 3310 Airport Avenue, SW Santa Monica, CA 90405-6118

Attention: Steven W. Smyrski

Atty Docket: JELI0004

#### **ASSIGNMENT**

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, we, the undersigned, **Andrew J. Mackinnon**, **Andrew James Garcia**, **Marinko Jelic**, and **Dick Amen**, do hereby sell, assign, and transfer to: **JELIGHT COMPANY**, **INC.**, a corporation of California, USA, having a place of business at 2 Mason, Irvine, California 92618, USA ("Assignee"), its successors, assign, and legal representatives, the entire right, title and interest for the United States and all foreign countries, in and to any and all inventions and improvements which are disclosed in the application for United States Letters Patent,

(X) which was filed on February 24, 2015 and assigned Serial No. 14/630,598,

and is entitled: **APPARATUS AND METHOD FOR COATING LENSES**, and in and to said application and all utility, divisional, continuing, substitute, renewal, reissue, and all other applications for Letters Patent which have been or shall be filed in the United States and all foreign countries on any of said improvements; and in any to all original and reissued patents which have been or shall be issued in the United States and all foreign countries on said improvements; and in and to all rights of priority resulting from the filing of said United States application; and

Agree that said Assignee may apply for and receive Letters Patent for said improvements in its own name; and that, when requested, without charge to, but at the expense of, said Assignee, its successors, assigns and legal representatives, to carry out in good faith the intent and purpose of this Assignment, the undersigned will execute all divisional continuing substitute, renewal, reissue, and all other patent applications on any and all said improvements; execute all rightful oaths, assignments, powers of attorney and other papers; communicate to said Assignee, its successors, assigns, and representatives, all facts known to the undersigned relating to said improvements and the history thereof, and generally do everything possible which said Assignee, its successors, assigns or representatives shall consider desirable for aiding in securing and maintaining proper patent protection for said improvements and for vesting title to said improvements and all applications to patents and all patents on said improvements, in said Assignee, its successors, assigns and legal representatives; and

Covenant with said Assignee, its successors, assigns and legal representatives that no assignment, grant mortgage, license, or other agreement affecting the rights and property herein conveyed has been made to others by the undersigned, and that full right to convey the same as herein expressed is possessed by the undersigned.

Name:	Date	e: <u>4 / / ,</u> 2015
Andrew J. Mackinnon		/
State of California	)	SS.
County of	)	
known to me (or proved to me on the bename is subscribed to the within instrume in his authorized capacity, and that by his upon behalf of which the person acted, ex	pasis of ent, and is signate ecuted t	ly appeared <b>Andrew J. Mackinnon</b> , personally satisfactory evidence) to be the person whose acknowledged to me that he executed the same sture on the instrument the person, or the entity the instrument.  er the laws of the State of California that the
WITNESS my hand and official seal.		
Notary Signature		(SEAL)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

which this certificate is attached, and not the truthf	ulness, accuracy, or validity of that document.
State of California	
County of	
On Aring 12015 before me, AS	(Here insert name and title of the officer)
personally appeared Androw Jour	es Machinum.
the within instrument and acknowledged to me	evidence to be the person(s) whose name(s) is/are subscribed to e that he/she/they executed the same in his/her/their authorized e(s) on the instrument the person(s), or the entity upon behalf of nent.
I certify under PENALTY OF PERJURY under is true and correct.	r the laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal.	ASHRAF SAMY DOUS COMMISSION # 1954854 O Notary Public - California
42)	ORANGE COUNTY  My Comm. Expires Oct. 2, 2015
ADDITIONAL O	OPTIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT  (Title of description of attached document)	INSTRUCTIONS FOR COMPLETING THIS FORM  Any acknowledgment completed in California must contain verhiage 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 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
(Title or description of attached document continued)	California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.
Number of Pages 3 Document Date	<ul> <li>State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.</li> <li>Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.</li> </ul>
(Additional information)	<ul> <li>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 public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time of notarization.</li> </ul>
CAPACITY CLAIMED BY THE SIGNER  Individual (s) Corporate Officer  (Title) Partner(s) Attorney-in-Fact Trustee(s) Other	<ul> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.</li> <li>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.</li> <li>Signature of the notary public must match the signature on file with the office of the county clerk.</li> <li>Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.</li> <li>Indicate title or type of attached document, number of pages and date.</li> <li>Indicate the capacity claimed by the signer. If the claimed capacity is a</li> </ul>
	<ul> <li>Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).</li> <li>Securely attach this document to the signed document</li> </ul>

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Name: Date:	-(-15, 2015
State of California ) ss.	
County of)	
On this day of, Notary Public, personally apper to me (or proved to me on the basis of satisfactory exsubscribed to the within instrument, and acknowledged authorized capacity, and that by his signature on the i behalf of which the person acted, executed the instrume I certify under PENALTY OF PERJURY under the foregoing paragraph is true and correct.	rared <b>Andrew Garcia</b> , personally known ridence) to be the person whose name is a to me that he executed the same in his instrument the person, or the entity upon nt.
WITNESS my hand and official seal.	
Notary Signature	(SEAL)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to

which this certificate is attached, and not the trut	hfulness, accuracy, or validity of that document.
State of California	
County of Oungs	
On April, 1665 before me, 9	A Shirth Same Down, Notary Public,
personally appeared Andrew Jan	us Garcia
who proved to me on the basis of satisfactory the within instrument and acknowledged to n	evidence to be the person(s) whose name(s) is/are subscribed to ne that he/she/they executed the same in his/her/their authorized re(s) on the instrument the person(s), or the entity upon behalf of
· · · · · · · · · · · · · · · · · · ·	er the laws of the State of California that the foregoing paragraph
is true and correct.  WITNESS my hand and official seal.	ASHRAF SAMY DOUS COMMISSION # 1954854 O Notary Public - California Z
WITTNESS My hand and official scale	ORANGE COUNTY My Comm Expires Oct. 2. 2015
	(Notary Seal)
Signature of Polary Public	
ADDITIONAL  DESCRIPTION OF THE ATTACHED DOCUMENT	OPTIONAL INFORMATION  INSTRUCTIONS FOR COMPLETING THIS FORM  Any acknowledgment completed in California must contain verhiage 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
(Title or description of attached document)	document is to be recorded outside of California. In such instances, any alternative 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 signer). Please check the document carefully for proper notarial wording and attach this form if required.
(Title or description of attached document continued)  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 must also be the same date the acknowledgment is completed.
(Additional information)	<ul> <li>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 public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time of notarization.</li> </ul>
CAPACITY CLAIMED BY THE SIGNER  Individual (s) Corporate Officer  (Title)	<ul> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.</li> <li>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.</li> <li>Signature of the notary public must match the signature on file with the office of</li> </ul>
☐ Partner(s) ☐ Attorney-in-Fact ☐ Trustee(s) ☐ Other	the county clerk.  Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.  Indicate title or type of attached document, number of pages and date.  Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

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**PATENT** REEL: 035547 FRAME: 0976

Name: Marinko Jelic	Date:	4-	1 -	15	, 2015	5
State of California	)	SS.				
County of USA	<u>´</u>				,	
On this day of, Notary Public me (or proved to me on the basis of subscribed to the within instrument, a authorized capacity, and that by his sibehalf of which the person acted, executive.	, personally satisfactor nd acknowlignature on	appear y evident ledged the ins	red Mar ence) to to me the strument	inko Jel be the nat he ex	ic, person person w secuted th	hose name is e same in his
I certify under PENALTY OF PERJ foregoing paragraph is true and correct		r the la	ws of t	he State	of Calife	ornia that the
WITNESS my hand and official seal.						
Notary Signature					/REATY	

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

which this certificate is attached, and not the truthi	unicss, accuracy, or variately of that document.
State of California	
County of	
of he	
On April 1 1015 before me, AS	Here insert name and title of the officer,
personally appeared Harinks	elic
the within instrument and acknowledged to me	evidence to be the person(s) whose name(s) is/are subscribed to e that he/she/they executed the same in his/ber/their authorized (s) on the instrument the person(s), or the entity upon behalf of nent.
certify under PENALTY OF PERJURY under	r the laws of the State of California that the foregoing paragraph
is true and correct.	
WITNESS my hand and official seal.	ASHRAF SAMY DOUS COMMISSION # 1954854 O Notary Public - California Z ORANGE COUNTY My Comm Expires Oct. 2, 2015
ignature of Mary Public	(Notary Seal)
ADDITIONAL (	OPTIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT  (Title or description of attached document)  (Title or description of attached document continued)	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 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 signer). Please check the document carefully for proper notarial wording and attach this form if required.
lumber of Pages Document Date #	<ul> <li>State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.</li> <li>Date of notarization must be the date that the signer(s) personally appeared which</li> </ul>
(Additional information)	<ul> <li>must also be the same date the acknowledgment is completed.</li> <li>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 public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time of</li> </ul>
APACITY CLAIMED BY THE SIGNER  Individual (s) Corporate Officer  (Title) Partner(s) Attorney-in-Fact	<ul> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.</li> <li>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.</li> <li>Signature of the notary public must match the signature on file with the office of the county clerk.</li> <li>Additional information is not required but could help to ensure this</li> </ul>
☐ Trustee(s) ☐ Other	acknowledgment is not misused or attached to a different document.  Indicate title or type of attached document, number of pages and date.  Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).  Securely attach this document to the signed document

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Name: Dick Amen		
State of California	) ) ss.	
County of	)	
, Notary Pubme (or proved to me on the basis subscribed to the within instrument	, in the year 2015, before plic, personally appeared <b>Dick Amen</b> , personally known of satisfactory evidence) to be the person whose not and acknowledged to me that he executed the same as signature on the instrument the person, or the entity ecuted the instrument.	own to ame is in his
I certify under PENALTY OF PER foregoing paragraph is true and corre	RJURY under the laws of the State of California thect.	nat the
WITNESS my hand and official seal	l.	
Notary Signature	(SEAL)	

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California	
County of	
On April 1 1265 before me, A	(Here hisert thame and title of the officer), Notary Public,
personally appeared Dick Amen	
the within instrument and acknowledged to me	vidence to be the person(s) whose name(s) is/are subscribed to that he/she/they executed the same in his/he/their authorized (s) on the instrument the person(s), or the entity upon behalf of ent.
I certify under PENALTY OF PERJURY under is true and correct.	the laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal.	ASHRAF SAMY DOUS COMMISSION # 1954854 O Notary Public - California ORANGE COUNTY My Comm Expires Oct. 2, 2015
Signature of North Public	(Notary Seal)
ADDITIONAL O	OPTIONAL INFORMATION  DISTRICTIONS FOR COMPLETING THIS FORM
DESCRIPTION OF THE ATTACHED DOCUMENT  Title or description of attached document)  (Title or description of attached document continued)	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 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 signer). Please check the document carefully for proper notarial wording and attach this form if required.
Number of Pages _ Document Date	
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(Additional information)	
(Additional information)	signer(s) personally appeared before the notary public for acknowledgment.  Date of notarization must be the date that the signer(s) personally appeared which 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 public).  Print the name(s) of document signer(s) who personally appear at the time of notarization.
	signer(s) personally appeared before the notary public for acknowledgment.  Date of notarization must be the date that the signer(s) personally appeared which 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 public).  Print the name(s) of document signer(s) who personally appear at the time of

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**RECORDED: 05/01/2015**