PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

EPAS ID: PAT3987415

| SUBMISSION TYPE: | NEW ASSIGNMENT |
|-----------------------|----------------|
| NATURE OF CONVEYANCE: | ASSIGNMENT |

CONVEYING PARTY DATA

| Name | Execution Date |
|---------------------|----------------|
| DENNIS J. WROBLESKI | 06/13/2016 |
| CLIFFORD KRAPFL | 06/13/2016 |
| HYUNG SEOK LEE | 06/13/2016 |

RECEIVING PARTY DATA

| Name: | BISSELL HOMECARE, INC. | |
|-----------------|--------------------------|--|
| Street Address: | 2345 WALKER AVENUE, N.W. | |
| City: | GRAND RAPIDS | |
| State/Country: | MICHIGAN | |
| Postal Code: | 49544-2516 | |

PROPERTY NUMBERS Total: 1

| Property Type | Number |
|---------------------|----------|
| Application Number: | 29572932 |

CORRESPONDENCE DATA

Fax Number: (616)742-1010

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: 616-742-3500

Email: patents@mcgarrybair.com

Correspondent Name: MCGARRY BAIR PC

Address Line 1: 32 MARKET AVE. SW, SUITE 500 Address Line 4: GRAND RAPIDS, MICHIGAN 49503

| ATTORNEY DOCKET NUMBER: | 71189-4297 |
|-------------------------|---------------|
| NAME OF SUBMITTER: | ERIN E. HALL |
| SIGNATURE: | /Erin E Hall/ |
| DATE SIGNED: | 08/01/2016 |

Total Attachments: 3

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> **PATENT** REEL: 039306 FRAME: 0623 503940760

| DECLARATION AND ASSIGNMENT FOR PATENT AND DESIGN APPLICATIONS | | | | | |
|---|---|-----------------|--------------------|---|--|
| TITLE OF INVENTION: | VACUUM CLEANER | | | | |
| As a below named inventor, | As a below named inventor, I hereby declare that: | | | | |
| This declaration is directed to | This declaration is directed to: | | | | |
| the attached applica | tion | | | | |
| or United States Appli | cation Number or PCT International | Application N | umber | filed on | |
| The above identified applica | tion was made or authorized to be ma | de by me. | | | |
| I believe that I am the original | al inventor or an original joint invento | or of a claimed | invention in the a | ipplication. | |
| I acknowledge that any willf imprisonment of not more th | ul false statement made in this declara an five (5) years, or both. | ation is punish | able under 18 U.S | .C. 1001 by fine or | |
| In consideration of the sum of One Dollar (\$1.00), and other valuable and legally sufficient consideration, the receipt and adequacy of which I hereby acknowledge, I hereby sell, assign, and transfer unto BISSELL HOMECARE, INC., a corporation of the State of Michigan having its principal office and place of business in the City of Grand Rapids, County of Kent, State of Michigan, (hereinafter "Assignee"), its successors and assigns, my entire right, title, and interest in, to, and under the above identified application and the inventions disclosed therein; any Patents of the United States of America that may be obtained in respect thereof; any corresponding applications for Patent and Patents issuing therefor in all other areas of the world; and any reissues, extensions, substitutions, confirmations, divisions, and continuations of any of the foregoing (hereinafter "Invention Rights"), to have and to hold for the sole and exclusive use and benefit of Assignee, its successors and assigns forever. I hereby covenant and agree to assist and cooperate with Assignee in the preparation and prosecution of any applications included within the Invention Rights and in the prosecution or defense of any review, opposition, or other proceeding that may arise in connection with any applications or Patent included within the Invention Rights and further to execute and deliver to Assignee any and all additional papers that may be requested by Assignee for the purpose of implementing the terms of this Assignment. | | | | | |
| Given Name (first and middle [if any]) Family Name or Surname | | | | | |
| | | Wrobleski | e of Surname | | |
| Inventor's Signature | | Dated | June 13th, | 2016 | |
| me known and known to me t | , 2016, personally appersonally apperson described in and who ed in and for the purposes set forth in | executed the f | foregoing instrume | ed Dennis J. Wrobleski, to ent and acknowledged the | |
| Notary Public | County, | | | | |
| My commission expires: | | | | | |

An application data sheet (PTO/SB/14 or equivalent), including naming the entire inventive entity, must accompany this form. Use an additional PTO/AIA/01 form for each additional inventor.

| DECLAR | RATION AND ASSIGNMENT FO | R PATENT AN | D DESIGN APPLICATIONS | |
|--|--|---|--|----|
| TITLE OF INVENTION: | VACUUM CLEANER | *************************************** | | |
| As a below named inventor, | I hereby declare that: | | | |
| This declaration is directed t | 70: | | | |
| the attached applica | ntion | | | |
| or United States Appli | ication Number or PCT International | Application Nun | nber filed on | |
| The above identified applica | tion was made or authorized to be ma | ade by me. | | |
| I believe that I am the origin | al inventor or an original joint invent | or of a claimed ir | nvention in the application. | |
| I acknowledge that any willf imprisonment of not more th | ul false statement made in this declar | ation is punishab | ole under 18 U.S.C. 1001 by fine or | |
| the State of Michigan having Michigan, (hereinafter "Assign identified application and the respect thereof; any corresponding reissues, extensions, substitut Rights"), to have and to hold I hereby covenant and agree within the Invention Rights a connection with any application. | sits principal office and place of busing gnee"), its successors and assigns, my enventions disclosed therein; any Panding applications for Patent and Patitions, confirmations, divisions, and conforthe sole and exclusive use and be to assist and cooperate with Assignee and in the prosecution or defense of an ions or Patent included within the Institute of the sole and included within the | nd transfer unto B ness in the City of y entire right, title itents of the Unite tents issuing there ontinuations of an enefit of Assignee in the preparation my review, opposity | sufficient consideration, the receipt and BISSELL HOMECARE, INC., a corporation of Grand Rapids, County of Kent, State of e, and interest in, to, and under the above ed States of America that may be obtained in efor in all other areas of the world; and any ny of the foregoing (hereinafter "Invention e, its successors and assigns forever. on and prosecution of any applications include ition, or other proceeding that may arise in d further to execute and deliver to Assignee and delimenting the terms of this Assignment. | ed |
| Given Name (first and middle | e [if any]) | Family Name o | or Surname | |
| Clifford Krapfl | 11111.11 | Krapfl | | |
| Inventor's Signature | afin /apple | Dated | 6/13/16 | |
| known and known to me to b | e the person described in and who ed in and for the purposes set forth in | executed the fore | the above-named Clifford Krapfl, to me going instrument and acknowledged the | |
| Notary Public | TOH County, <u>COC</u> 08/26/201 | 6 | OFFICIAL SEAL J HATCH Notary Public - State of Illinois My Commission Expires Aug 26, 2016 | |
| | | 1 | | |

An application data sheet (PTO/SB/14 or equivalent), including naming the entire inventive entity, must accompany this form. Use an additional PTO/AIA/01 form for each additional inventor.

Page 1 of 1

| DECLAR | ATION AND ASSIGNMENT FO | OR PATENT AND DESI | GN APPLICATIONS |
|---|--|--|---|
| TITLE OF INVENTION: | VACUUMCLEANER | | |
| As a below named inventor | . Thereby declare that: | Mondado se Renediros que en espera este apunhamenta de la comerción de la comerción de la comerción comerción | |
| This declaration is directed | to: | | |
| the attached applic | ation | | |
| or United States Appl | ication Number or PCT Internation | al Application Number | filed on |
| The above identified applica | ntion was made or authorized to be | made by me. | |
| I believe that I am the origin | al inventor or an original joint inve | ntor of a claimed invention | in the application. |
| I acknowledge that any will imprisonment of not more th | ul false statement made in this decl | aration is punishable under | 18 U S C. 1001 by fine or |
| the State of Michigan having Michigan, (hereinafter "Assidentified application and the respect thereof, any corresponding the state of | acknowledge, Thereby sell, assign, gits principal office and place of bugnee"), its successors and assigns, it inventions disclosed therein, any londing applications for Patent and Pitions, confirmations, divisions, and for the sole and exclusive use and to assist and cooperate with Assignand in the prosecution or defense of | and transfer unto BISSELI isiness in the City of Grand my entire right, title, and in Patents of the United States atents issuing therefor in all continuations of any of the benefit of Assignee, its succeeding the preparation and plany review, opposition, or nyention Rights and further any review. | HOMECARE, INC., a corporation of Rapids, County of Kent, State of terest in, to, and under the above of America that may be obtained in I other areas of the world; and any eforegoing (hereinafter "Invention cessors and assigns forever rosecution of any applications included other proceeding that may arise in |
| Given Name (first and middl | e (if any)) | Family Name or Surnar | ${ m Re}$ |
| Hyung Seok | | L&C | |
| me in anarcho in to the to of | DIVE 2016, personally appethe person described in and who exceed in and for the purposes set fo | eared before me the above- | named Hyung Seok Lee, to me rument and acknowledged the |
| Notary Public | TCH County. CO. | | OFFICIAL SEAL J HATCH Notary Public - State of Illinois dy Commission Expires Aug 26, 2016 |

An application data sheet (PTO SB 14 or equivalent), including naming the entire inventive entity, must accompany this form. Use an additional PTO AIA 01 form for each additional inventor

Page 1 of 1

PATENT REEL: 039306 FRAME: 0626

RECORDED: 08/01/2016