504522303 08/28/2017

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4569009

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
CLAIRE BERNICE MCROBERTS	03/01/2016
SERENITY BERNTSON	03/07/2016

RECEIVING PARTY DATA

Name:	HUNTER FAN COMPANY
Street Address:	7130 GOODLETT FARMS PARKWAY, SUITE 400
City:	MEMPHIS
State/Country:	TENNESSEE
Postal Code:	38016

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	29615275

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: 45 OTTAWA AVE. SW

Address Line 2: SUITE 700

Address Line 4: GRAND RAPIDS, MICHIGAN 49503

ATTORNEY DOCKET NUMBER:	72312-0498
NAME OF SUBMITTER:	MARK A. DAVIS
SIGNATURE:	/Mark A Davis/
DATE SIGNED:	08/28/2017

Total Attachments: 3

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PATENT 504522303 REEL: 043423 FRAME: 0426

DECLARATION AND ASSIGNMENT FOR PATENT AND DESIGN APPLICATIONS		
TITLE OF INVENTION:	CEILING FAN	
As a below named inventor	or, I hereby declare that:	
This declaration is directed	i to:	
the attached applie or	eation	
United States App	lication Number or PCT International Application Number filed on .	
The above identified appli	cation was made or authorized to be made by me.	
I believe that I am the orig	inal inventor or an original joint inventor of a claimed invention in the application.	
	Ilful false statement made in this declaration is punishable under 18 U.S.C. 1001 by fine or than five (5) years, or both.	
corporation of the State of of Shelby, State of Tennes in, to, and under the above of America that may be ob therefor in all other areas of continuations of any of the use and benefit of Assigne	Delaware, having its principal office and place of business in the City of Memphis, County see, (hereinafter "Assignee"), its successors and assigns, my entire right, title, and interest identified application and the inventions disclosed therein; any Patents of the United States tained in respect thereof; any corresponding applications for Patent and Patents issuing of the world; and any reissues, extensions, substitutions, confirmations, divisions, and foregoing (hereinafter "Invention Rights"), to have and to hold for the sole and exclusive e, 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 interference, 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 mid	dle [if any]) Family Name or Surname	
Claire Bernice	McRoherts	
Inventor's Signature	lain Bersice Mit & Dated March 1st, 2016	
On this day of, 2016, personally appeared before me the above-named Claire Bernice McRoberts, to me known and known to me to be the person described in and who executed the foregoing instrument and acknowledged the same to be her free act and deed in and for the purposes set forth in said instrument.		
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.

Page 1 of 1

DECLARATION AND ASSIGNMENT FOR PATENT AND DESIGN APPLICATIONS			
TITLE OF INVENTION:	CEILING FAN		
As a below named inventor, I hereby declare that:			
This declaration is directe	d to:		
the attached applie	cation		
or United States App	olication Number or PCT Internation	onal Applicati	on Number filed on .
The above identified appli	cation was made or authorized to	be made by m	ne.
I believe that I am the orig	inal inventor or an original joint in	nventor of a cl	laimed invention in the application.
	llful false statement made in this of than five (5) years, or both.	leclaration is p	punishable 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, Hunter Fan Company, a corporation of the State of Delaware, having its principal office and place of business in the City of Memphis, County of Shelby, State of Tennessee, (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 interference, 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 mic	Idle (if any))	Family Nam	ne or Surname
Serenity	1 1 1	Berntson	
Inventor's Signature	nowy	Dated	3-7-16
		executed the fo	te the above-named Serenity Berntson, to pregoing instrument and acknowledged the at.
Notary Public <u>S. MALUI</u>	County, San fa		See Attached California All Purpose Acknowledgment
My commission expires:	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.

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CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 San Francisco	_ }
On $03/07/20/\ell$ before me,	S.MALHI, Notary Public (Here insert name and title of the officer)
personally appeared Security who proved to me on the basis of satis name(\$) is/are subscribed to the within he/she/they executed the same in his/li	factory evidence to be the person(s) whose instrument and acknowledged to me that ner/their authorized capacity(ies), and that by nent the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJUR the foregoing paragraph is true and co	Y under the laws of the State of California that prect.
WITNESS my hand and official seal.	S. MALHI Commission No. 2122017 NOTARY PUBLIC-CALIFORNIA SAN FRANCISCO COUNTY My Comm. Expires AUGUST 2, 2019
Notary Public Signature (1	Notary Public Seal)
DESCRIPTION OF THE ATTACHED DOCUMENT DE Claration and Assign were Cutent & Design Applicati (Title or description of attached document continued) Number of Pages 1 Document Date 03/67/11	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s) Other	 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. 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. Signature of the notary public must match the signature on file with the office of 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).
2015 Version www.NotaryClasses.com 800-873-9865	Securely attach this document to the signed document with a staple.

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RECORDED: 08/28/2017