506509452 02/17/2021

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT6556228

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

CONVEYING PARTY DATA

| Name | Execution Date |
|------------------|----------------|
| STEVE M. JOHNSON | 12/19/2014 |

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: | 17177710 | |

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.

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Correspondent Name: MCGARRY BAIR PC

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Address Line 4: GRAND RAPIDS, MICHIGAN 49503

| ATTORNEY DOCKET NUMBER: | 71189-5153 | |
|-------------------------|----------------|--|
| NAME OF SUBMITTER: | SARA L. HAAS | |
| SIGNATURE: | /Sara L. Haas/ | |
| DATE SIGNED: | 02/17/2021 | |

Total Attachments: 1

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PATENT REEL: 055297 FRAME: 0877

506509452

| DECLA | RATION AND ASSIGNMEN | IT FOR PATENT | T AND DESIGN APPLICATIONS | |
|---|--|---|--|--|
| TITLE OF INVENTION: | SURFACE CLEANING AP | PARATUS | | |
| As a below named inventor, | I hereby declare that: | | | |
| This declaration is directed | to: | | | |
| the attached application | ation | | | |
| or United States Appl | ication Number or PCT Interna | utional Application | Number filed on | |
| | identified application was mad | | | |
| i | | | ned invention in the application. | |
| 1 | | | lity as defined in Title 37, Code of Federal | |
| I acknowledge that any willf imprisonment of not more th | ul false statement made in this an five (5) years, or both. | declaration is puni | ishable under 18 U.S.C. 1001 by fine or | |
| I hereby state that I have revi amended by any amendment | iewed and understand the conte specifically referred to above. | ents of the above ic | dentified specification, including the claims, as | |
| State of Michigan having its (hereinafter "Assignee"), its application and the invention thereof; any corresponding at extensions, substitutions, con have and to hold for the sole. I hereby covenant and agree t within the Invention Rights at connection with any applicati | principal office and place of be successors and assigns, my enti- s disclosed therein; any Patents oplications for Patent and Pater firmations, divisions, and conti- and exclusive use and benefit of o assist and cooperate with Assind in the prosecution or defensions or Patent included within the | ign, and transfer usiness in the City re right, title, and a of the United States is sissuing therefor inuations of any of Assignee, its successignee in the prepare of any review, of the Invention Right. | ally sufficient consideration, the receipt and into BISSELL HOMECARE, INC., a corporation of the of Grand Rapids, County of Kent. State of Michigan, interest in, to, and under the above identified tes of America that may be obtained in respect in all other areas of the world; and any reissues, the foregoing (hereinafter "Invention Rights"), to be cessors and assigns forever. Intation and prosecution of any applications included position, or other proceeding that may arise in its and further to execute and deliver to Assignee any implementing the terms of this Assignment. | |
| Given Name (first and middle [if any]) Family Name or Surname | | | | |
| Steve M. | A A STREET, ST | Johnson | or of a surface | |
| Inventor's Signature | tophin- | Dated | 12/19/14 | |
| On this day of | , 2014, personally the person described in and | who executed the | ne the above-named Steve M. Johnson, to me foregoing instrument and acknowledged the | |
| Notary Public | County, | *************************************** | | |
| My commission expires: | | | | |
| An application data sheet (PTO | /SB/14 or equivalent), including | ng naming the enti | re inventive entity, must accompany this | |

PATENFE ge 1 of 1 **RECORDED: 02/17/2021 REEL: 055297 FRAME: 0878**

form. Use an additional PTO/AIA/01 form for each additional inventor.