

PATENT ASSIGNMENT COVER SHEET

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EPAS ID: PAT7963119

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
ALBERT STRAUS	02/21/2019
ROBERT J. MICHAEL	03/08/2019
RECEIVING PARTY DATA	
Name:	AES R&D, LLC
Street Address:	2133 PINE VALLEY DRIVE
City:	TIMONIUM
State/Country:	MARYLAND
Postal Code:	21093
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	17569505
CORRESPONDENCE DATA	
Fax Number:	(484)531-1735
<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>	
Phone:	484-531-1700
Email:	ltorres@offitkurman.com
Correspondent Name:	OFFIT KURMAN, P.A.
Address Line 1:	401 PLYMOUTH ROAD
Address Line 2:	SUITE 100
Address Line 4:	PLYMOUTH MEETING, PENNSYLVANIA 19462
ATTORNEY DOCKET NUMBER:	04840056.00006
NAME OF SUBMITTER:	LAURIE TORRES
SIGNATURE:	/Laurie Torres/
DATE SIGNED:	05/19/2023
Total Attachments: 2	
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source=Assignments_04840056_00006#page2.tif	

ASSIGNMENT

I, the below-identified Inventor, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to **AES R&D, LLC** ("Assignee"), a limited liability company of Maryland, domiciled in Baltimore County, MD, and its successors, assigns, and legal representatives, (the "Assignee"), the entire right, title, and interest throughout the world in and to all subject matter invented by me and disclosed in the application for a Letters Patent in the United States associated with the above attorney docket number and titled:

Face Mask Shock-Mounted to Helmet Shell

and in and to all patent and all foreign, convention and treaty rights of all kinds, in all countries throughout the world, for all such subject matter or improvements therein, including all rights of action and damages for past infringements, the same to be held and enjoyed by Assignee for its own use and behoof, and for its legal representatives and assigns, to the full end of the term for which said Patent is granted, as fully and entirely as the same would have been held by me had this assignment not been made. I agree to sign all papers necessary to secure all said patent rights, and request issuance of all said patents to Assignee in accordance with this Assignment.

2-21-19

Date

Albert Straus

Albert Straus

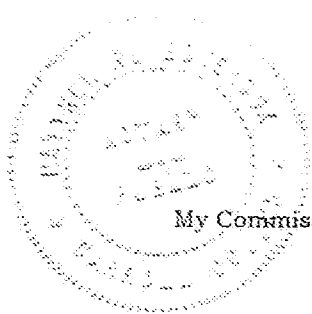
2133 Pine Valley Drive
Timonium, MD 21093
Baltimore County

IN THE COUNTY OF Carroll)
STATE OF Maryland) ss.:

I hereby certify that before me personally appeared Albert Straus, personally known by me or showing satisfactory evidence of identification, who then and there was duly sworn by me, and who acknowledged that he executed the above instrument for the purposes therein contained on the date appearing at the foot thereof, all of which took place within my jurisdiction.

Witness my hand and seal, this 21st day of February 2019.

[Signature]
Notary Public



My Commission Expires: _____

MATTHEW R BOWERSOX
NOTARY PUBLIC
CARROLL COUNTY
MARYLAND
My Commission Expires 07/23/2020

ASSIGNMENT

I, the below-identified Inventor, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to **AES R&D, LLC** (the "Assignee"), a limited liability company of Maryland, domiciled in Baltimore County, MD, and its successors, assigns, and legal representatives, the entire right, title, and interest throughout the world in and to all subject matter invented by me and disclosed in the application for a Letters Patent in the United States associated with the above attorney docket number and titled:

Face Mask Shock-Mounted to Helmet Shell

and in and to all patent and all foreign, convention and treaty rights of all kinds, in all countries throughout the world, for all such subject matter or improvements therein, including all rights of action and damages for past infringements, the same to be held and enjoyed by Assignee for its own use and behoof, and for its legal representatives and assigns, to the full end of the term for which said Patent is granted, as fully and entirely as the same would have been held by me had this assignment not been made. I agree to sign all papers necessary to secure all said patent rights, and request issuance of all said patents to Assignee in accordance with this Assignment.

3/8/2019
Date

Robert J. Michael
Robert J. Michael
8850 Martha Way
Waterford, PA 16441
Erie County

IN THE COUNTY OF Erie }
STATE OF Pennsylvania } ss.:

I hereby certify that before me personally appeared Robert J. Michael, personally known by me or showing satisfactory evidence of identification, who then and there was duly sworn by me, and who acknowledged that he executed the above instrument for the purposes therein contained on the date appearing at the foot thereof, all of which took place within my jurisdiction.

Witness my hand and seal, this 8th day of March, 2019.

Jessica L. Short
Notary Public

My Commission Expires: Dec 10, 2020

