

02-19-1999



100966192

RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY

NRD  
2/16/99

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

New

Resubmission (Non-Recordation)  
Document ID # \_\_\_\_\_

Correction of PTO Error  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_

Corrective Document  
Reel # \_\_\_\_\_ Frame # \_\_\_\_\_

Conveyance Type

Assignment  License

Security Agreement  Nunc Pro Tunc Assignment

Merger

Effective Date  
Month Day Year  
02 05 99

Change of Name

Other \_\_\_\_\_

Conveying Party

Mark if additional names of conveying parties attached

Name Diemolding Corporation Execution Date  
Month Day Year  
02 05 99

Formerly \_\_\_\_\_

Individual  General Partnership  Limited Partnership  Corporation  Association

Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization State of New York

Receiving Party

Mark if additional names of receiving parties attached

Name DHD Healthcare Corporation

DBA/AKA/TA \_\_\_\_\_

Composed of \_\_\_\_\_

Address (line 1) 125 Rasbach St

Address (line 2) \_\_\_\_\_

Address (line 3) Canastota New York 13032  
city State/Country Zip Code

Individual  General Partnership  Limited Partnership  If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Corporation  Association

Other \_\_\_\_\_

Citizenship/State of Incorporation/Organization State of New York

490 E

02/18/1999 SBURNS 00000116 75319963

FOR OFFICE USE ONLY

01 FC:481 40.00 OP  
02 FC:482 450.00 OP

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK  
REEL: 1855 FRAME: 0922

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages** Enter the total number of pages of the attached conveyance document including any attachments.

#

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

**Trademark Application Number(s)**

**Registration Number(s)**

<input type="text" value="75/319,963"/>	<input type="text" value="75/328,989"/>	<input type="text" value="75/319,958"/>	<input type="text" value="2,169,659"/>	<input type="text" value="1,747,750"/>	<input type="text" value="1,039,178"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1,084,605"/>	<input type="text" value="1,135,055"/>	<input type="text" value="1,155,449"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1,217,440"/>	<input type="text" value="1,410,344"/>	<input type="text" value="1,477,532"/>

**Number of Properties** Enter the total number of properties involved.

#

**Fee Amount** Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment: Enclosed  Deposit Account

Deposit Account (Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number: #

Authorization to charge additional fees: Yes  No

**Statement and Signature**

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

August E. Roehrig, Jr.

2/11/99

Name of Person Signing

Signature

Date Signed

RECORDATION FORM COVER SHEET  
CONTINUATION  
TRADEMARKS ONLY

**Conveying Party**

Enter Additional Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

Formerly

Individual  General Partnership  Limited Partnership  Corporation  Association

Other

Citizenship State of Incorporation/Organization

**Receiving Party**

Enter Additional Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)     
City State/Country Zip Code

Individual  General Partnership  Limited Partnership

Corporation  Association

Other

Citizenship/State of Incorporation/Organization

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached (Designation must be a separate document from the Assignment.)

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

<input type="text" value="1,477,533"/>	<input type="text" value="1,701,621"/>	<input type="text" value="1,712,571"/>
<input type="text" value="1,727,334"/>	<input type="text" value="1,851,913"/>	<input type="text" value="1,756,637"/>
<input type="text" value="1,993,875"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

## ASSIGNMENT OF UNITED STATES TRADEMARKS

WHEREAS, DIEMOLDING CORPORATION, a corporation organized and existing under the laws of the State of New York, having a place of business at 125 Rasbach Street, Canastota, New York 13032 (hereinafter "Assignor"), is the owner of the entire right, title and interest in various trademark registrations and applications attached hereto as Schedule A, including the goodwill of the business symbolized by the said trademark registrations and applications; and

WHEREAS, DHD HEALTHCARE CORPORATION, a corporation organized and existing under the laws of the State of New York, having a principal place of business at 125 Rasbach Street, Canastota, New York 13032 desires to acquire the said trademark registrations and applications;

NOW, THEREFORE, to all whom it may concern, be it known that for one dollar (\$1.00) and other good and valuable consideration, the receipt of which is hereby acknowledged, Assignor does hereby sell, assign, transfer and set over unto Assignee all right, title and interest in and to the said trademark registrations and applications, together with the goodwill of the business symbolized by the trademark registrations and applications.

IN WITNESS WHEREOF, Assignor has caused this instrument to be signed by

its duly authorized representative this 5th day of February, 1999.

**ASSIGNOR:**

**DIEMOLDING CORPORATION**  
a New York corporation

By: Donald H. Dew  
**DONALD H. DEW**

Title: President

STATE OF NEW YORK            )  
  ) ss:  
COUNTY OF MADISON         )

On this 5th day of February, 1999, before me personally appeared DONALD H. DEW, to me known to be the person in the foregoing instrument and he duly acknowledged to me the execution thereof.

Witness my hand and official seal.

My commission expires: \_\_\_\_\_

**DENNIS P. COSTANZO**  
Notary Public in and for the State of New York  
Qualified to Perform Notary Public Duties Since 07/26/88  
My Commission Expires 9/30/00

Dennis P. Costanzo  
Notary Public

K:\INT\_PROPAER\DIEMOLD\ITMASSIGN

# SCHEDULE A

## Registered United States Trademarks

<u>Mark</u>	<u>Registration No.</u>	<u>Registration Date</u>
DHD	2,169,659	06/30/98
ACE	1,747,750	01/19/93
VACON	1,039,178	05/11/76
RESPIREX	1,084,605	02/07/78
CADUCEUS LOGO	1,135,055	05/13/80
VOLUREX	1,155,449	05/26/81
RESCAL	1,217,440	11/23/82
PALM CUPS	1,410,344	09/23/86
THE DHD COACH	1,477,532	02/23/88
THE DHD COACH JR. and Design	1,477,533	02/23/88
NIF-TEE	1,701,621	07/21/92
DHD and Design	1,712,571	09/01/92
ULTRASET	1,727,334	10/27/92
DURA LIFE	1,851,913	08/30/94
VENTLOK	1,756,637	03/09/93
THERAPEP	1,993,875	08/13/96

## Pending United States Trademark Applications

<u>Mark</u>	<u>Serial Number</u>	<u>Filing Date</u>
COACH 2	75/319,963	07/07/97
Miscellaneous Design	75/328,989	07/18/97
COACH 2 FOR KIDS	75/319,958	07/07/97

K:\INT\_PROP\AER\DIEMOLD\TMSCHDA.DOC