Form PTO-1594 1-31-92 12-14-04	RE		U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office		
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
Name of conveying party(ies):		2. Name and address of receiv			
Sunrise Medical HHG Inc.					
		Name: <u>Deutsche Bank Trust Company Americas</u>			
☐ Individuals ☐ Association ☐ General Partnership ☐ Limited Partnership		Street Address: 60 Wall Street			
☐ General Partnership - ☐ Corporation-State - California	□ Limited Lattriersmb	City: New York State: New	v York ZIP: 10005		
☐ Other		☐ Individual(s) citizenship			
Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No		A A A A A A A A A A A A A A A A A A A			
3. Nature of conveyance:		☐ General Partnership			
☐ Assignment	☐ Merger	☐ Limited Partnership			
☑ Security Interest	Change of Name	Corporation x Other Collateral Agent			
☐ Other			r. 8		
Execution Date: December 3, 2004					
4. Application number(s) or registration nu	ımber(s):	Trademark Registration No.(s)	DEC 14 M 9:		
A. Trademark Application No.(s) 78/502497		2248856 2250954	2 0		
78/502497		2721366	7 -		
		2782423	2 3		
	A Lifety I		NCE		
5. Name and address of party to whom co	Additional numbers attac	ched? ☐ Yes ☒ No 6. Total number of application			
document should be mailed:	or espondence concerning	involved	s and registration 5		
Name: <u>Matthew Bart</u>					
Internal Address: <u>c/o White & Case LL</u>	<u>P</u>	7. Total fee (37 CFR 3.41): .	\$ 140.00		
		☑ Enclosed	d an dan said an anna		
Street Address: 1155 Avenue of the Americas		Authorized to be charge 8. Deposit account number:	d to deposit account		
City: New York State: New York ZIP: 10036		23-1705 (in event of deficiency)			
		(Attach duplicate copy of the	nis page if paying by deposit account)		
2/17/2004 ECOOPER 00000319 78502497	DO NOT USE	THIS SPACE			
80: 85 81 40.00 0	Ē				
FC:4522 100.00 8	<u>, , , , , , , , , , , , , , , , , , , </u>				
9. Statement and signature. To the best of my knowledge and believe	f the foregoing information is	true and correct and any attacher	d conv is a true conv of the original		
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.					
Matthew Bart		Ute Bank	December 14, 2004		
Name of Person Signing		Signature	Date		
		Total number of page	s comprising cover sheet:		
OMB No. 0651-0011 (exp. 4/94)					
Do not detach this portion					
Mail documents to be recorded with required cover sheet information to:					
Mail Stop Assignment Recordation Services					
Director of US Patent and Trademark Office PO Box 1450					
Alexandria, VA 22313-1450					
Public burden reporting for this cample gover sheet is estimated to average about 20 minutes are decument to be accorded					
Public burden reporting for this sample cover sheet is estimated to average about 30 minutes per document to be recorded, including time for reviewing the document and gathering the data needed, and completing and reviewing the sample cover sheet.					
Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Office of Information Systems, PK2-					
1000C, Washington, D.C. 20231, and to the Office of Management and Budget, Paperwork Reduction Project (0651-0011), Washington, D.C. 20503.					

12/14/2004 9:56 AM (2K) NEWYORK 4532749 mb-Sunrise-Recordation Form Cover Sheet GRANT OF SECURITY INTEREST IN UNITED STATES TRADEMARKS

FOR GOOD AND VALUABLE CONSIDERATION, receipt and sufficiency of which are

hereby acknowledged, Sunrise Medical HHG Inc., a California corporation with principal offices

at 7477 East Dry Creek Parkway, Longmont, CO 80503, (the "Grantor") hereby grants to

Deutsche Bank Trust Company Americas, as Collateral Agent, with principal offices at 60 Wall

Street, New York, New York 10005, (the "Grantee"), a security interest in (i) all of the

Grantor's right, title and interest in and to the United States trademarks, trademark registrations

and trademark applications (the "Marks") set forth on Schedule A attached hereto, (ii) all

Proceeds (as such term is defined in the Security Agreement referred to below) and products of

the Marks, (iii) the goodwill of the businesses with which the Marks are associated and (iv) all

causes of action arising prior to or after the date hereof for infringement of any of the Marks or

unfair competition regarding the same.

THIS GRANT is made to secure the satisfactory performance and payment of all the Obligations

of the Grantor, as such term is defined in the Security Agreement among the Grantor, the other

assignors from time to time party thereto and the Grantee, dated as of May 13, 2004 (as

amended, modified, restated and/or supplemented from time to time, the "Security Agreement").

Upon the occurrence of the Termination Date (as defined in the Security Agreement), the

Grantee shall execute, acknowledge, and deliver to the Grantor an instrument in writing releasing

the security interest in the Marks acquired under this Grant.

This Grant has been granted in conjunction with the security interest granted to the Grantee

under the Security Agreement. The rights and remedies of the Grantee with respect to the

security interest granted herein are as set forth in the Security Agreement, all terms and

provisions of which are incorporated herein by reference. In the event that any provisions of this

NEWYORK 4500053 (2K)

Grant are deemed to conflict with the Security Agreement, the provisions of the Security Agreement shall govern.

[Remainder of this page intentionally left blank; signature page follows]

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IN WITNESS WHEREOF, the undersigned have executed this Grant as of the 3rd day of December, 2004.

SUNRISE MEDICAL HHG INC., Grantor

Name: Andrew Wilson

Title: Assistant Secretary

Suarise Trudomark Signature Page

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California County of <u>San Diego</u>	ss.
on Dec. 3, 2004 before me, Green personally appeared Andrew Wilson	
	Name(s) of Spreaks;
Commission # 144000 Hotory Public - Collinates Sun Diego County My Comm. Busines Col 20, 2607	to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(iee), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal. Grand Grand Grand Smith.
	ONAL
Description of Attached Document	
Title or Type of Document: GRant of Securit	ty Interest in U.S. TRademarks
Document Date: Dee. 3, 2004	· _
Signer(s) Other Than Named Above: Deutsche	
Capacity(lee) Claimed by Signer	
Signer's Name: Andrew Wilson	
☐ Individual ☐ Corporate Officer — Title(s): A 951. Se ☐ Partner — ☐ Limited ☐ General ☐ Attorney-in-Fact ☐ Trustee ☐ Guardian or Conservator ☐ Other: Other:	certary Top of thumb here
Signer Is Representing: <u>SunRise</u> MEdica	al HHG. Ina.

DEUTSCHE BANK TRUST COMPANY AMERICAS, as Collateral Agent and Grantee

Name:

Scottve Lindse

Title:

Director

Survise Trademark Signature Page

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STATE OF New York) ss:

On this 3/d day of December, 2004, before me personally came Scottye Lindsey who, being by me duly sworn, did state as follows: that [s]he is a Director of Deutsche Bank Trust Company Americas, that [s]he is authorized to execute the foregoing Grant on behalf of said corporation and that [s]he did so by authority of the Board of Directors of said corporation.

Notary Public

MAUREEN E. THOMAS
Notary Public - State of New York
No. 01TH6098264
Qualified in Bronx County
Certified in New York County
My Commission Expires 9/08/20

Sunrise Trademark Signature Page

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<u>MARK</u>	REG. NO.	REG. DATE
AES	2248856	6/1/1999
AES LOGO	2250954	6/8/1999
FLEXI-FEET	2721366	6/3/2003
SURE SHAPE LOGO	2782423	11/11/2003
REHABILITECH	78-502497	10/19/2004

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RECORDED: 12/14/2004