


Client Code: CTP.UCC1

**RECORDATION FORM COVER SHEET
TRADEMARKS ONLY**

To the Director, U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof.

| | |
|--|--|
| <p>1. Name of conveying party(ies): (List using letters or numbers for multiple parties)</p> <p>CORNERSTONE TECHNOLOGY PARTNERS, INC.</p> <p><input type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Association <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other: <input checked="" type="checkbox"/> Corporation of: CA</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | <p>2. Name and address of receiving party(ies):</p> <p>Name: KNOBBE MARTENS OLSON & BEAR, LLP Internal Address: FOURTEENTH FLOOR Street Address: 2040 MAIN STREET City: IRVINE State: CA ZIP: 92614</p> <p><input type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Association <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Other: California <input type="checkbox"/> Corporation of: Limited Liability Partnership</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Additional name(s) and address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |
| <p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement <input type="checkbox"/> Merger <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other: Security Interest</p> <p>Execution Date: (List as in section 1 if multiple signatures) AUGUST 23, 2012</p> | <p>4. Application number(s) or registration number(s):</p> <p>a. Trademark Application No(s): 85/190581</p> <p>b. Trademark Registration No(s):</p> <p>Additional numbers attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <p>5. Party to whom correspondence concerning document should be mailed:</p> <p>Customer No. 20,995 Address: Knobbe, Martens, Olson & Bear, LLP 2040 Main Street, 14th Floor Irvine, CA 92614 Return Fax: (949) 760-9502 Attorney's Docket No.: CTP.UCC1</p> | <p>6. Total number of applications and registrations involved: 2</p> <p>7. Total fee (37 CFR 1.21(h)): \$65.00 <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p> |
| <p>8. Deposit account number: 11-1410</p> <p>Please charge this account for any additional fees which may be required, or credit any overpayment to this account.</p> | |
| <p>9. Statement and signature.</p> <p>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.</p> <p>STEVEN J. NATAUPSKY  <u>10/17/12</u> Name of Person Signing Signature Date</p> <p align="center">Total number of pages including cover sheet, attachments and document: 5</p> | |

Documents transmitted via Facsimile to be recorded with required cover sheet information to:

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TRADEMARK
REEL: 004885 FRAME: 0345

CH \$65.00 111410 85190581

| Case No. | Trademark Name: | Application No. | Filing Date: |
|-----------------|------------------------|------------------------|---------------------|
| CTP.004T | ECORECT | 85/190581 | 12/3/2010 |
| CTP.005T | HCO | 85/190614 | 12/3/2010 |

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]
 Michell T. Do
 (949) 760-0404

B. SEND ACKNOWLEDGMENT TO: (Name and Address)
 Knobbe, Martens, Olson & Bear, LLP
 2040 Main Street, 14th Floor
 Irvine, CA 92614
 USA

DOCUMENT NUMBER: 34343960002
 FILING NUMBER: 12-7326394077
 FILING DATE: 08/23/2012 16:24
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1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

| | | | | |
|--|--|-------------------|---|--|
| OR | | | | |
| 1a. ORGANIZATION'S NAME Cornerstone Technology Partners, Inc. | | | | |
| 1b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME | SUFFIX |
| 1c. MAILING ADDRESS 18662 MacArthur Blvd., Suite 200 | | CITY Irvine | STATE CA | POSTAL CODE 92612 |
| 1d. SEE INSTRUCTIONS | | ADD'L DEBTOR INFO | 1e. TYPE OF ORGANIZATION CORPORATION | 1f. JURISDICTION OF ORGANIZATION CA |
| 1g. ORGANIZATIONAL ID#, if any <input checked="" type="checkbox"/> NONE | | | | |

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

| | | | | |
|---|--|-------------------|--------------------------|----------------------------------|
| OR | | | | |
| 2a. ORGANIZATION'S NAME | | | | |
| 2b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME | SUFFIX |
| 2c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE |
| 2d. SEE INSTRUCTIONS | | ADD'L DEBTOR INFO | 2e. TYPE OF ORGANIZATION | 2f. JURISDICTION OF ORGANIZATION |
| 2g. ORGANIZATIONAL ID#, if any <input type="checkbox"/> NONE | | | | |

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

| | | | | |
|---|--|----------------|-------------|----------------------|
| OR | | | | |
| 3a. ORGANIZATION'S NAME Knobbe Martens Olson & Bear, LLP | | | | |
| 3b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME | SUFFIX |
| 3c. MAILING ADDRESS 2040 Main St., 14th Floor | | CITY Irvine | STATE CA | POSTAL CODE 92614 |
| COUNTRY USA | | | | |

4. This FINANCING STATEMENT covers the following collateral:

See Attachment(s)

5. ALT DESIGNATION: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS
 Attach Addendum [if applicable]

7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)
 [ADDITIONAL FEE] [optional] All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA

CTP - UCC1

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 REEL: 004885 FRAME: 0347

All of debtor's intellectual property that is or has ever been the subject of secured party's representation and all files and records relating thereto, any recoveries from litigation involving such intellectual property, including, without limitation, any judgments, amounts paid in settlement, insurance proceeds and any awards of attorneys' fees and costs, and any other proceeds of such intellectual property, including, but not limited to, the property described below.

U.S. Patent & Patent Applications

| Application No. | App. Filing Date | Title of Invention |
|-----------------|------------------|--|
| 13/422987 | 3/16/2012 | ORGANIC WASTE DECOMPOSITION SYSTEM AND METHOD WITH WATER RECYCLING |
| 13/071304 | 3/24/2011 | ORGANIC WASTE DECOMPOSITION EXCHANGE SYSTEM |

Non U.S. Patent & Patent Applications

| Application No. | App. Filing Date | Country | Title of Invention |
|-----------------|------------------|---------|---|
| 200980109334.X | 3/17/2009 | CN | ORGANIC WASTE DECOMPOSITION SYSTEM AND METHOD |

All of debtor's intellectual property that is or has ever been the subject of secured party's representation and all files and records relating thereto, any recoveries from litigation involving such intellectual property, including, without limitation, any judgments, amounts paid in settlement, insurance proceeds and any awards of attorneys' fees and costs, and any other proceeds of such intellectual property, including, but not limited to, the property described below.

U.S. Trademark & Trademark Applications

| Application No. | App. Filing Date | Trademark Name |
|-----------------|------------------|----------------|
| 85/190581 | 12/3/2010 | ECORECT |
| 85/190614 | 12/3/2010 | HCO |

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