

TIS/MADRID ASSIGNMENT

Electronic Version v1.0  
Stylesheet Version v1.0

SUBMISSION TYPE:	NEW ASSIGNMENT	<b>APPLICATION NUMBER</b> <b>79119046</b>										
NATURE OF CONVEYANCE:	CHANGE OF NAME											
CONVEYING PARTY DATA												
<table border="1"><thead><tr><th>Name</th><th>Execution Date</th></tr></thead><tbody><tr><td>Dr. Ferdinand Schwenkert</td><td>10/29/2013</td></tr></tbody></table>			Name	Execution Date	Dr. Ferdinand Schwenkert	10/29/2013						
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Dr. Ferdinand Schwenkert	10/29/2013											
RECEIVING PARTY DATA												
<table border="1"><tr><td>Name:</td><td>Dr. Ferdinand Schwenkert</td></tr><tr><td>Address:</td><td>Regerstraße 27 81541 München</td></tr><tr><td>Country:</td><td>DE</td></tr><tr><td>Entity Type:</td><td></td></tr><tr><td>Entity Country:</td><td>DE</td></tr></table>			Name:	Dr. Ferdinand Schwenkert	Address:	Regerstraße 27 81541 München	Country:	DE	Entity Type:		Entity Country:	DE
Name:	Dr. Ferdinand Schwenkert											
Address:	Regerstraße 27 81541 München											
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Entity Type:												
Entity Country:	DE											
CORRESPONDENCE DATA												
Correspondent Name:	Dr. Ferdinand Schwenkert											
Address:	Regerstraße 27 81541 München											
Country:	DE											

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