

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM339204

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ASSIGNMENT OF THE ENTIRE INTEREST AND THE GOODWILL		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Impact Instrumentation, Inc.		04/22/2015	CORPORATION: NEW JERSEY
RECEIVING PARTY DATA			
Name:	Zoll Medical Corporation		
Street Address:	269 Mill Road		
City:	Chelmsford		
State/Country:	MASSACHUSETTS		
Postal Code:	01824		
Entity Type:	CORPORATION: MASSACHUSETTS		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	3874873	EMV+	
Registration Number:	2502197	ULTRA-LITE	
CORRESPONDENCE DATA			
Fax Number:	8777697945		
<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>			
Email:	tmdoctc@fr.com		
Correspondent Name:	Debra S. Serota		
Address Line 1:	PO Box 1022		
Address Line 4:	Minneapolis, MINNESOTA 55440-1022		
ATTORNEY DOCKET NUMBER:	04644-0001010		
NAME OF SUBMITTER:	Debra S. Serota		
SIGNATURE:	/debra s serota/		
DATE SIGNED:	04/23/2015		
Total Attachments: 2			
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source=NotarizedConfirmatoryAssignment (2)#page2.tif			

CH \$65.00 3874873

CONFIRMATORY ASSIGNMENT

WHEREAS, Impact Instrumentation, a New Jersey corporation, and having a usual place of business at 27 Fairfield Place, West Caldwell, NJ 07006 ("Assignor") and ZOLL Medical Corporation, a Massachusetts corporation, and having a usual place of business at 269 Mill Road, Chelmsford, Massachusetts 01824 ("Assignee") are parties to a Trademark Assignment agreement with an effective date of October 31, 2014 (the "Trademark Assignment");

WHEREAS, certain trademarks, as set forth in the attached Appendix A (the "Trademarks"), were erroneously omitted from the Trademark Assignment;

WHEREAS, Assignor intended to assign the Trademarks to Assignee, and Assignee was and is desirous of acquiring the Trademarks;

NOW, THEREFORE, for One Dollar (US\$1.00) and other good and valuable consideration, receipt of which is hereby acknowledged, Assignor assigns to Assignee all right, title, and interest in and to the Trademarks as set forth in the attached Appendix A, together with the goodwill of the business symbolized by the marks, effective as of October 31, 2014.

Assignee and Assignor agree that multiple copies of this Confirmatory Assignment may be executed, each of which shall be deemed an original, and each of which shall be valid and binding upon Assignee and Assignor.

IN WITNESS WHEREOF, Assignor and Assignee have caused this Assignment to be executed as a sealed instrument by their duly authorized representatives.

IMPACT INSTRUMENTATION, INC.

ZOLL MEDICAL CORPORATION

Name: Leslie H. Sherman

Name: Walter L. Hall

Signature: [Signature]

Signature: [Signature]

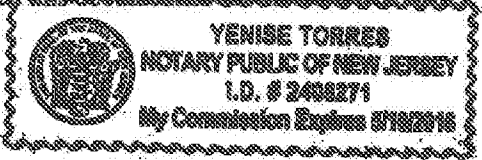
Title: [Signature]

Title: V.P. Finance + Admin

On this 22 day of April, ~~2014~~ ²⁰¹⁵, before me, the undersigned Notary Public, personally appeared Leslie Sherman, proved to me through satisfactory evidence of identification, which was/were Personally Known, to be the person whose name is signed on the preceding or attached document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his/her knowledge and belief. The above-identified individual is duly authorized to execute this document singly on behalf of Assignee and executed this document of his/her own free will.

Signature of Notary: [Signature]

My Commission Expires: 5-10-16



On this 22 day of April, ~~2014~~ ²⁰¹⁵, before me, the undersigned Notary Public, personally appeared Walter Hall, proved to me through satisfactory evidence of identification, which was/were Personally Known, to be the person whose name is signed on the preceding or attached document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his/her knowledge and belief. The above-identified individual is duly authorized to execute this document singly on behalf of Assignee and executed this document of his/her own free will.

Signature of Notary: [Signature]

My Commission Expires: 5-10-16

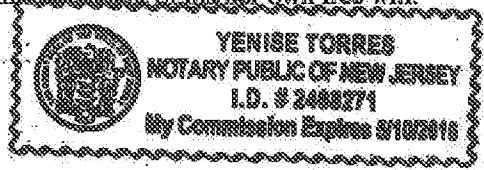


EXHIBIT A

<i>Mark</i>	<i>Jurisdiction</i>	<i>Application No. & Date</i>	<i>Registration No. & Date</i>
EMV+	United States		3874873; 11/9/10
ULTRA-LITE	United States		2502197; 10/30/01