FORM PTO-1594 (Rev. 6-93) RECOR' 12	-07 - 1999 I.S. DEPARTMENT OF COMMERCE Patent and Trademark Office
OMB No. 0851-0011 (exp. 4/94)	
Tob pottings and an extension of the continuous and	01216095
To the Assistant Commissioner of Tradenians. Tieas	e record the attached original documents or copy thereof.
Name of conveying party(ies):	Name and address of receiving party(ies)
Kahnetics LLC 2260 South Vista Avenue Bloomington, CA 92316	Name: <u>Cooper Industries, Inc.</u>
☐ Individual(s) ☐ Association	Internal Address:
☐ General Partnership ☐ Limited Partnership ☐ Corporation-State	Street Address: 600 Travis, Suite 5800
OtherLimited LiabilityCompany	City: <u>Houston</u> State: <u>TX</u> ZIP: <u>77002</u>
Additional name(s) of conveying party(ies) attached? Yes No	☐ Individual(s) citizenship ☐ Association
Nature of conveyance:	☐ General Partnership ☐ Limited Partnership
	☑ Corporation-State Ohio
☐ Security Agreement ☐ Change of Name	☐ Other
Other	If assignee is not domiciled in the United States, a domestic representative design is attached: ☐ Yes ☐ No
Execution Date: November 18, 1999	(Designations must be a separate document from assignment) Additional name(s) & address(es) attached? ☐ Yes ☒ No
4. Application number(s) or registration number(s):	
A. Trademark Application No.(s)	B. Trademark Registration No.(s)
	1,923,289
Additional numbers a	I attached? □Yes □No
5. Name and address of party to whom correspondence	6. Total number of applications and registrations involved:
concerning document should be mailed:	registrations involved.
Name: Rhonda J. Smith, CLAS	7. Total fee (37 CFR 3.41)\$ 40.00
Internal Address: <u>Cooper Industries, Inc.</u>	☐ Enclosed
	Authorization to be charged to deposit account
Street Address: 600 Travis, Suite 5800	8. Deposit account number:
	03-3120
City: <u>Houston</u> State: <u>TX</u> ZIP: <u>77002</u>	(Attach duplicate copy of this page if paying by deposit account)
DO NOT U	SE THIS SPACE
of the original document.	formation is true and correct and any attached copy is a true copy
Rhonda J. Smith Name of Person Signing	Signature November 18, 1999 Date
Total number of pages including cover	
NA 11 become at the comment of the c	with required cover cheet information to:

Mail documents to be recorded with required cover sheet information to: 23289 BOX ASSIGNMENT

12/06/1999 DNGUYEN 00000236 033120

01 FC:481

1923289

Commissioner of Patents and Trademarks Washington, D.C. 20231

ASSIGNMENT OF REGISTRATION OF A MARK

Whereas KAHNETICS LLC, a California limited liability company
(name of assignor) of 2260 South Vista Avenue, Bloomington, CA 92316
of
has adopted, used and is using a mark which is registered in the United States Patent and Trademark Office,
Registration No. 1,923,289 , dated October 3, 1995 ; and
Whereas Cooper Industries, Inc., an Ohio corporation
of 600 Travis, Suite 5800 , Houston, Texas 77002
(address) is desirous of acquiring said mark and the registration thereof;
Now, therefore, for good and valuable consideration, receipt of which is hereby acknowledged, said
KAHNETICS LLC does hereby assign unto the said
(name of assignor)
Cooper Industries, Inc. all right, title and interest in and to the
State of CALFORNIA State of CALFORNIA County of Riverside On this 21 day of September On the person who signed this instrument,
who acknowledged that he/she signed it as a free act on his/her own behalf (or on behalf of the identified corporation or other juristic entity with authority to do so). Alcia Frausto Commission # 1087036 Notary Public — California Riverside County Initia County Riverside Coun
(2) If assignee is not domiciled in the United States, a comestic representative must be designated. See form 4.4, changing the word "applicant" to "assignee."

PTO Form 4.22 (Trademarks)

Patent and Trademark Office - U.S. DEPT. of COMMERCE

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of CALIFORNIA County of Riversioe	
00 500+0m her 21, 1999 hote	ore me, Alicia Feausto Name and Title of Officer (e.g., "Jane Doe, Notary Public") Name(s) of Signer(s)
Date Date	Name and Title of Officer (e.g., "Jane Doe, Notary Public")
ALICIA FRAUSTO Commission # 1087036 Niotary Public — California Riverside County Iviy Comm. Expires Feb 9,2000	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(ies), 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. Signature of Notary Public
	— OPTIONAL ————
, ,	y, it may prove valuable to persons relying on the document and could prevent
fraudulent removal an	y, it may prove valuable to persons relying on the document and could prevent d reattachment of this form to another document.
, ,	y, it may prove valuable to persons relying on the document and could prevent d reattachment of this form to another document.
fraudulent removal an	v, it may prove valuable to persons relying on the document and could prevent d reattachment of this form to another document.
Title or Type of Document:	v, it may prove valuable to persons relying on the document and could prevent d reattachment of this form to another document.
Title or Type of Document: Document Date:	v, it may prove valuable to persons relying on the document and could prevent d reattachment of this form to another document. ent Number of Pages:
Title or Type of Document: Document Date: Signer(s) Other Than Named Above:	w, it may prove valuable to persons relying on the document and could prevent d reattachment of this form to another document. Int Number of Pages:
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s)	w, it may prove valuable to persons relying on the document and could prevent direattachment of this form to another document. ent Number of Pages:
Title or Type of Document: Document Date: Signer(s) Other Than Named Above:	w, it may prove valuable to persons relying on the document and could prevent direattachment of this form to another document. ent Number of Pages:
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(Signer's Name: Individual	w, it may prove valuable to persons relying on the document and could prevent described reattachment of this form to another document. Int Signer's Name: Individual
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Individual Corporate Officer Title(s):	w, it may prove valuable to persons relying on the document and could prevent direattachment of this form to another document. Int Signer's Name: Individual I Corporate Officer Title(s):
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(Signer's Name: Individual Corporate Officer Title(s): Partner — Limited General	(s) Signer's Name: Individual Corporate Officer Title(s): Partner — Limited General
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(Signer's Name: Individual Corporate Officer Title(s): Partner — Limited General Attorney-in-F-act Trustee	Number of Pages:
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(Signer's Name: Individual Corporate Officer Title(s): Partner — Limited General Attorney-in-Fact Trustee Guardian or Conservator	Signer's Name:
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(Signer's Name: Individual Corporate Officer Title(s): Partner — Limited General Attorney-in-Fact Trustee Guardian or Conservator Other: Other Top of the conservator	Signer's Name:
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(Signer's Name: Individual Corporate Officer Title(s): Partner —	Signer's Name:
Description of Attached Docume Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(Signer's Name: Individual Corporate Officer Title(s): Partner — Limited General Attorney-in-Fact Trustee Guardian or Conservator Other: Other Top of the conservator	Signer's Name:

© 1994 National Notary Association • 8/236 Remmet Ave., P.O. Box 7184 • Canoga Park, CA 91309-7184

RECORDED: 11/18/1999

Prod. No. 5907

Reorder: Call Toll-Free 1-800-876-6827

TRADEMARK REEL: 001996 FRAME: 0260