



RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

2007 JAN -8 PM 2:12

FINANCE SECTION

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1-8-07

1. Name of conveying party(ies):

Micelle Products, Inc.

- Individual(s)
- General Partnership
- Corporation- State: California
- Other _____
- Association
- Limited Partnership

Citizenship (see guidelines) _____

Additional names of conveying parties attached? Yes No

3. Nature of conveyance /Execution Date(s) :

Execution Date(s) December 18, 2006

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? Yes No

Name: Industrial Materials Corporation
 Internal
 Address: 25131 Arctic Ocean Drive
 Street Address: 25131 Arctic Ocean Drive
 City: Lake Forest
 State: California
 Country: USA Zip: 92630

- Association
- General Partnership
- Limited Partnership
- Corporation
- Other _____

Citizenship _____
 If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
 (Designations must be a separate document from assignment)

4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)
75/437,417

B. Trademark Registration No.(s)
2,230,682

Additional sheet(s) attached? Yes No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):
ARTHRAMINE

5. Name & address of party to whom correspondence concerning document should be mailed:

Name: Gabor L. Szekeres
 Internal Address: P.O. Box 27938
Anaheim Hills, Ca 92809
 Street Address: P.O. Box 27938
 City: Anaheim Hills
 State: California Zip: 92809
 Phone Number: 714-944-5778
 Fax Number: 714-639-4961
 Email Address: _____

6. Total number of applications and registrations involved:

1

7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 40.00

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed

8. Payment Information:

a. Credit Card Last 4 Numbers _____
 Expiration Date _____
 b. Deposit Account Number 502362
 Authorized User Name Gabor L. Szekeres

9. Signature:

Gabor L. Szekeres
Signature

January 3, 2007
Date

01/09/2007 01 FC:8521
BYRNE 00000085 2230682

Gabor L. Szekeres
Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 3

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

ASSIGNMENT


WHEREAS, **Micelle Products, Inc.**, a California corporation, having its principal offices at 25131 Arctic Ocean Drive, Lake Forest, California 92630, U.S.A., is the owner of the following trademark now registered in the United States Patent and Trademark Office:

<u>Trademark</u>	<u>Registration No.</u>	<u>Registration Date</u>
ARTHRAMINE	2,230,682	March 9, 1999

WHEREAS, **Industrial Materials Corporation**, a California corporation, having its principal offices at 25131 Arctic Ocean Drive, Lake Forest, California 92630, U.S.A., is desirous of acquiring said registered trademark.

NOW THEREFORE, in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration, the receipt of which is hereby acknowledged, **Micelle Products, Inc.** hereby assigns to **Industrial Materials Corporation**, all right, title and interest in the United States in and to said trademark together with the goodwill of the business symbolized by said trademark and registration thereof.

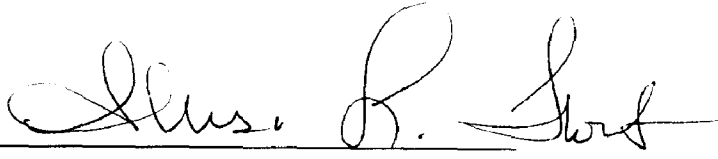
Signed at Lake Forest California this 18th day of December, 2006
(City, State) (Day) (Month) (Year)

By: 
Edward Alosio
President

STATE OF CALIFORNIA)
) ss.
COUNTY OF ORANGE)

On December 18, 2006, before me, Allison L. Flores
personally appeared Edward Alosio personally known to me – OR – proved to me on the basis of
satisfactory evidence to be the person whose name is subscribed to the within instrument and
acknowledged to me that he executed the same in his authorized capacity, and that by his
signature on the instrument the person, or the entity upon behalf of which the person acted,
executed the instrument.

WITNESS my hand and official seal.



Notary

SEAL:

