PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents

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(571)-273-2885 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7590 08/29/2016 Gardner, Linn, Burkhart & Flory, LLP 2851 Charlevoix Dr., SE, Suite 207 Grand Rapids, MI 49546

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Lynette M. Clark	(Depositor's name)
/lmc/	(Signature)
November 28, 2016	(Date)

			N	(Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ITORNEY DOCKET NO.	CONFIRMATION NO.	
29/522,339	03/30/2015	Raymond A. Holman			HOL05 P-100	2628	
TITLE OF INVENTION	: EXHAUST PIPE TIP						
APPLN. TYPE	ENTITY STATUS	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FI	EE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	MICRO	\$140	\$0	\$0	\$140	11/29/2016	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS				
PRATT, MICH	IAEL AARON	2914	D12-194000	l			
1. Change of correspond	ence address or indicatio	on of "Fee Address" (37	2. For printing on the p	atent front page, list			
CFR 1.363).			(1) The names of up to 3 registered patent attorneys or agents OR, alternatively, Gardner, Linn,				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(2) The name of a singl	e firm (having as a me	_{ember a} 2 Burkhar	t & Flory, LLP	
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
			THE PATENT (print or type data will appear on the patential of the patenti		is identified below, the de	ocument has been filed for	
(A) NAME OF ASSI		pietion of this form is NO	(B) RESIDENCE: (CITY				
` '					,		
Please check the appropr	riate assignee category or	r categories (will not be pr	rinted on the patent): \Box	Individual Gorpo	oration or other private gro	oup entity 🗖 Government	
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Plea	se first reapply any p	previously paid issue fee	shown above)	
☑ Issue Fee ☐ Publication Fee (No small entity discount permitted)			A check is enclosed. Baywent by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies			The director is hereby authorized to charge any additional fee(s), any dificiency, or credits any overpayment, to Deposit Account Number 50-5553 (enclose an extra copy of this form).				
			overpayment, to Depo	sit Account Number _	50-5553 (enclose a)	n extra copy of this form).	
5. Change in Entity Sta	*						
☐ Applicant certifying micro entity status. See 37 CFR 1.29			<u>NOTE</u> : Absent a valid certification of Micro Entity Status (see forms PTO/SB/15A and 15B), issue fee payment in the micro entity amount will not be accepted at the risk of application abandonment.				
Applicant asserting small entity status. See 37 CFR 1.27			<u>NOTE:</u> If the application was previously under micro entity status, checking this box will be taken to be a notification of loss of entitlement to micro entity status.				
Applicant changin	g to regular undiscounte	d fee status.	NOTE: Checking this box will be taken to be a notification of loss of entitlement to small or micro entity status, as applicable.				
NOTE: This form must b	be signed in accordance v	with 37 CFR 1.31 and 1.3	3. See 37 CFR 1.4 for signa	ture requirements and	certifications.		
Authorized Signature	/mdk/		Date November 28, 2016				
Typed or printed name Matthew D. Kendall			Registration No. 60815				

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