06-28-2001



## **SHEET**

101764096

| Commissioner for Patents: Please record the attached original docu-   | ment(s) or copy(ies).   |
|---|---|
| Name of conveying party(ies):   | 2. Name and address of receiving party(ies):  |
| Cheryl A. Conover Antonio Bayes-Genis David R. Holmes Robert S. Schwartz  | Mayo Foundation for Medical Education and<br>Research<br>200 First Street S.W.<br>Rochester, MN 55905   |
| Additional name(s) attached? ☐ Yes ☒ No   | <b>一                                    </b>  |
| 3. Nature of conveyance:  |   |
| <ul> <li>☒ Assignment</li> <li>☐ Merger</li> <li>☐ Security Agreement</li> <li>☐ Change of Name</li> <li>☐ Other:</li> </ul>  |   |
| Execution Date: 05/31/2001; 05/22/2001; 06/05/2001; 06/06/2001  | Additional names/addresses attached? 口 Yes 国 No and a   |
| 4. Application number(s) or patent number(s):   |   |
| If this document is being filed with a new application, the execut  | ion date of the application is:   |
| A. Patent Application No(s).:   | B: Patent No(s).:   |
| 09/760,376  |   |
| Additional numbers  | s attached? ☐ Yes ☒ No  |
| 5. Name/address of party to whom correspondence concerning<br>document should be mailed:  | 6. Total number of applications/patents involved: 1   |
| MARK S. ELLINGER, PH.D.   | 7. Total fee (37 CFR §3.41): \$40   |
| Fish & Richardson P.C., P.A.  | ☑ Enclosed  |
| 60 South Sixth Street   | ☐ Authorized to charge Deposit Account.   |
| Suite 3300  | ☐ Authorized to charge Deposit Account.  8. Deposit Account No.: 06-1050  |
|   |   |
| Suite 3300<br>Minneapolis, MN 55402   | 8. Deposit Account No.: 06-1050  Please apply any additional charges, or any credits, to our  |
| Suite 3300<br>Minneapolis, MN 55402   | 8. Deposit Account No.: 06-1050  Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.   |
| 9. Statement and Signature: To the best of my knowledge a any attached copy is a true copy of the original document.  Monica McCormick Graham, Ph.D.  Reg. No. 42,600   | 8. Deposit Account No.: 06-1050  Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.  ISE THIS SPACE  and belief, the foregoing information is true and correct and ent.  Left 20/0/   |
| 9. Statement and Signature: To the best of my knowledge a any attached copy is a true copy of the original docume.  Monica McCormick Graham, Ph.D.  Reg. No. 42,600 Name of Person Signing  No. 42,600 Name of Person Signing   | 8. Deposit Account No.: 06-1050  Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.  ISE THIS SPACE  and belief, the foregoing information is true and correct and  |
| 9. Statement and Signature: To the best of my knowledge as any attached copy is a true copy of the original document.  Monica McCormick Graham, Ph.D.  Reg. No. 42,600 Name of Person Signing  No. 142,600 Name of Person Signing   | 8. Deposit Account No.: 06-1050  Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.  ISE THIS SPACE  and belief, the foregoing information is true and correct and ent.  Lucidity Date  |
| 9. Statement and Signature: To the best of my knowledge as any attached copy is a true copy of the original document.  Monica McCormick Graham, Ph.D.  Reg. No. 42,600 Name of Person Signing  No. 142,600 Name of Person Signing   | 8. Deposit Account No.: 06-1050 Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.  ISE THIS SPACE  and belief, the foregoing information is true and correct and ent.  Date  Total number of pages including coversheet, attachments and document:   |
| Suite 3300 Minneapolis, MN 55402  DO NOT U  9. Statement and Signature: To the best of my knowledge a any attached copy is a true copy of the original docum  Monica McCormick Graham, Ph.D.  Reg. No. 42,600 Name of Person Signing  OI LMUELLER 00000003 03760376  Signature  CERTIFIC TE OF MAILING BY EXTENDED.   | 8. Deposit Account No.: 06-1050  Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.  ISE THIS SPACE  Ind belief, the foregoing information is true and correct and ent.  Lo /20/ Indeed to page including coversheet, attachments and document:  Express MAIL  Express Mail Label No. EL734684793US  It this correspondence is being deposited with the United States Postal Service as with sufficient postage on the date indicated below and is addressed to the |
| Suite 3300 Minneapolis, MN 55402  DO NOT U  9. Statement and Signature: To the best of my knowledge at any attached copy is a true copy of the original document of the interest of the original document of Person Signing  Monica McCormick Graham, Ph.D. Reg. No. 42,600 Name of Person Signing  OI LMUELLER 00000003 03760376  CERTIFIC TE OF MAILING BY EXTENSION OF THE PROPERTY OF THE | 8. Deposit Account No.: 06-1050  Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.  ISE THIS SPACE  Ind belief, the foregoing information is true and correct and ent.  Date  Total number of pages including coversheet, attachments and document:  Express Mail Label No. <u>EL734684793US</u> It this correspondence is being deposited with the United States Postal Service as with sufficient postage on the date indicated below and is addressed to the    |

## **ASSIGNMENT**

For valuable consideration, we, <u>CHERYL A. CONOVER</u> of <u>939</u> - 22nd Avenue S.W., Rochester, MN 55902, ANTONIO BAYES-GENIS of Frederic Mompov 621, Barcelona, Spain 08005, DAVID R. HOLMES of 1122 - 21st Street N.E., Rochester, MN 55901, and ROBERT S. SCHWARTZ of 1123 Audax Lane S.W., Rochester, MN 55902 hereby assign to Mayo Foundation for Medical Education and Research, a Minnesota corporation having a place of business at 200 First Street S.W., Rochester, MN 55905; and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of an application for United States Patent, entitled MARKER FOR INFLAMMATORY CONDITIONS, filed January 12, 2001, and having U.S. Serial Number <u>09/760,376</u>, including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and we agree for ourselves and our respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

| IN WITNESS WHEREOF, I hereto set my hand a        | and seal at Saint Man         | yr Hosp,   |
|---|-------------------------------|--|
| this 3/ day of May ,20                            |                               | L.S.   |
| CHERYL A. CONOVER                                 |                               |  |
| State of Minnesota:                               |                               |  |
| State of Minnesota:  County of Olmsted:           |                               |  |
| Before me this 31 day of May                      | , 20 <u>0/</u>                | , personally   |
| appeared CHERYL A. CONOVER known to me to         |                               |  |
| the foregoing Assignment and acknowledged that he | executed the same as his free | e act and deed   |
| for the purposes therein contained.               |                               |  |
| Notary Pu   | ella S. Wandler<br>blic       |  |
| My Comn   | nission Expires:              |  |
| [Notary's Seal Here]                              |                               |  |
|   |                               | YLLA WINDLER<br>Notary Public<br>Minnesota<br>nission Expires Jan 31, 2005 |

| IN WITNESS WHI           | EREOF, I hereto set my hand a | iliu seal at              |                      |
|--------------------------|-------------------------------|---------------------------|----------------------|
| this <u>22</u> day of    |                               | 01                        |                      |
|                          | • /                           | tall Ba                   | L.S.                 |
| A                        | NTONIO BAYES-GENIS            |                           | 2                    |
|                          |                               | wir les                   | ally.                |
| State of                 | :                             | 3                         |                      |
|                          | : ss.                         |                           |                      |
| County of                | :                             |                           |                      |
|                          |                               |                           |                      |
| Before me this _         | day of                        | , 20                      | , personally         |
| appeared ANTONIO BA      | AYES-GENIS known to me        | to be the person whose na | ame is subscribed to |
| the foregoing Assignme   | nt and acknowledged that he   | executed the same as his  | s free act and deed  |
| for the purposes therein | contained.                    |                           |                      |
|                          |                               |                           |                      |
|                          |                               |                           |                      |
|                          | Notary Pu                     | blic                      |                      |
|                          | My Comn                       | nission Expires:          |                      |

[Notary's Seal Here]

| IN WITNESS WHEREOF, I hereto set my hand and seal at Saint Must this 5 th day of June , 2001                  |                 |
|---|-----------------|
| DAVID R. HOLMES   | L.S.            |
| State of Municotta): ss.  |                 |
| county of County of : ss.   |                 |
| Before me this 5th day of June, 2001 appeared DAVID R. HOLMES known to me to be the person whose name is sub- |                 |
| foregoing Assignment and acknowledged that he executed the same as his free ac                                | ct and deed for |
| the purposes therein contained.   |                 |
|   | nAI             |

VICKÍ Virginia Olswold NOTARY PUBLIC - MINNESOTA BRY COMMISSION EXPIRES JAN. 31, 2005

[Notary's Seal Here]

My Commission Expires: January 31, 2005

| IN WITNESS WHEREOF I herete set much and a land of the set of the |
|---|
| IN WITNESS WHEREOF, I hereto set my hand and seal at Sount More Hook tall this 6th day of Jule, 2001  |
| L.S.  |
| ROBERT S SCHWARTZ   |
| State of Minnesota:   |
| County of Material:   |
| Before me this 6 day of 7116, 200, personally   |
| appeared ROBERT S. SCHWARTZ known to me to be the person whose name is subscribed to  |
| he foregoing Assignment and acknowledged that he executed the same as his free act and deed   |
| for the purposes therein contained.   |
| Vicki Virginia Olewold NOTARIV PUBLIC - MINNESOTA NOTARI PUBLIC - |
| My Commission Expires: January 31, 2005 Notary's Seal Herel   |

**RECORDED: 06/21/2001**