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09/857156

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To the Honorable Commissioner of Patents and Trademarks, please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Nilsson, Agne

09/14/01

Additional names(s) of conveying party(ies)

☐ Yes ☒ No

3. Nature of conveyance:

☒ Assignment

☐ Merger

☐ Security Agreement

☐ Change of Name

☐ Other

Execution Date: September 5, 2001

2. Name and address of receiving party(ies):

Name: Johnson Medical Development Pte. Ltd.

Address: No. 10 Toh Guan Road

#01-02/03, TT International Tradepark

City: _____ State/Prov.: _____

Country: SINGAPORE ZIP: 608838

Additional name(s) & address(es)

☐ Yes ☒ No

4. Application number(s) or registration numbers(s):

If this document is being filed together with a new application, the execution date of the application is: _____

Patent Application No.

Filing date

B. Patent No.(s)

09/857,156

May 31, 2001

09/27/2001 UEDUVIJE 00000064 09857156

01 FC:581

40.00 DP

Additional numbers

☐ Yes ☒ No

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

Name: Diane Dunn McKay

Registration No. 34,586

Address: Mathews, Collins, Shepherd & Gould, P.A.

100 Thanet Circle, Suite 306

City: Princeton State/Prov.: NJ

Country: USA ZIP: 08540

6. Total number of applications and patents involved:

1

7. Total fee (37 CFR 3.41):.....\$ 40.00

☒ Enclosed - Any excess or insufficiency should be credited or debited to deposit account

☐ Authorized to be charged to deposit account

8. Deposit account number:

13-2165

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9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Diane Dunn McKay

Name of Person Signing

Signature

September 24, 2001

Date

Total number of pages including cover sheet, attachments, and

3

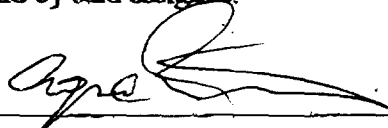
PATENT

REEL: 012236 FRAME: 0524

ASSIGNMENT

WHEREAS, Agne NILSSON, Aloni House, Phinikaria Village,
4530 LIMASSOL, CYPRUS as assignor(s) has (have) invented
 certain improvements in METHOD AND DEVICE FOR VENTILATING A SO CALLED
CLEAN ROOM for which an application for United
 States Letters Patent has been executed by _____ on _____ and whereas
JOHNSON MEDICAL DEVELOPMENT PTE LTD, No. 10 Toh Guan Road
#01-02/03, TT International Tradepark, 608838 SINGAPORE
 _____ as assignee, is desirous of acquiring all
 right, title and interest in and to said invention and any Letters Patent that may be granted therefor.

NOW, THEREFORE, in consideration of One Dollar (\$1.00) and other good and valuable
 consideration, the receipt of which is hereby acknowledged, _____ as assignor(s) hereby sell, assign
 and set over to said assignee the entire right, title and interest for the United States and all other countries
 in and to said invention and the aforesaid application for Letters Patent, all original, divisional,
 continuation, substitute or reissue applications and patents applied for or granted therefor in the United
 States and all countries foreign, and the Commissioner of Patents is hereby authorized and requested to
 issue all patents on said improvements or resulting therefrom to said assignee herein, as assignee of the
 entire interest therein, and the undersigned for _____ and _____ legal representative, heirs
 and assigns do hereby agree and covenant without further remuneration, to execute and deliver all
 divisional, continuation, reissue and other applications for Letters Patent on said improvements and all
 assignments thereof to said assignee or its assigns, to communicate to said assignee or its representative
 all facts known to the undersigned respecting said improvements, whenever requested, to testify in any
 interferences or other legal proceedings in which any of said applications or patents may become involved,
 to sign all lawful papers, make all rightful oaths, and to do generally everything necessary to aid assignee,
 its successors, assigns and nominees to obtain patent protection for said improvements in all countries,
 the expenses incident to said applications to be borne and paid by said assignee.



 Agne Nilsson

State of _____

ss: _____

County of _____

This _____ day of _____, 19____, before me personally came the above-
 named _____ to me known
 as the individual(s) who executed the foregoing instrument who acknowledged to me that the same was
 executed by _____ of _____ own free will for the purposes therein set forth.

(SEAL)

 NOTARY PUBLIC