Substitute Form PTO-1595 Attorney Docket No.: 07039-171001

₹ SHEET

102107452

| Commissioner for Patents: Pleas | | | |
|--|--|--|--|
| 1. Name of conveying party(ies): | | Name and address of receiving party(ies): | |
| (1) Holger G. Gassner and (2) David A. Sherris Additional name(s) attached? □ Yes 图 No 3. Nature of conveyance: | | Mayo Foundation for Medical Education and Research | |
| | | | 200 First Street S.W. Rochester, MN 55905 |
| | | ☑ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Other: | |
| Execution Date: (1) 05/14 | /02 (2) 05/08/02 | Additional names/addresses attached? ☐ Yes ☑ No | |
| 4. Application number(s) or pater | nt number(s): | | |
| If this document is being filed | with a new application, the execut | tion date of the application is: | |
| A. Patent Application No(s).: | | B: Patent No(s).: | |
| 09/807,793 filed 04 | /18/01 | | |
| | Additional numbers | s attached? ☐ Yes 图 No | |
| Name/address of party to whom correspondence concerning document should be mailed: | | 6. Total number of applications/patents involved: 1 | |
| MONICA MCCORMICK GRAHAM, PH.D. Fish & Richardson P.C., P.A. | | 7. Total fee (37 CFR §3.41): \$40 | |
| | | ☑ Enclosed | |
| 60 South Sixth Street Suite 3300 | | ☐ Authorized to charge Deposit Account. | |
| Minneapolis, MN 55402 | 2 | 8. Deposit Account No.: 06-1050 | |
| ' ' | | | |
| | DO NOT U | Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050. SE THIS SPACE | |
| 9. Statement and Signature: To any attached copy is a true Monica McCormick Graha Reg. No. 42,600 Name of Person Signing | the best of my knowledge a copy of the original docume | Deposit Account No. 06-1050. SE THIS SPACE Industry the foregoing information is true and correct | |
| any attached copy is a true Monica McCormick Graha Reg. No. 42,600 | the best of my knowledge as copy of the original documents. m, Ph.D. Signature | Deposit Account No. 06-1050. ISE THIS SPACE Ind belief, the foregoing information is true and correct ent. Induction of the foregoing information is true and correct ent. | |
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PATENT REEL: 012929 FRAME: 0223

Attorney Docket No: 07039-171001

ASSIGNMENT

For valuable consideration, we, HOLGER G. GASSNER of 232 - 6th Avenue S.E., Rochester, MN 55904, and DAVID A. SHERRIS of 626 - 5th St. 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 signed by us, entitled METHODS FOR ENHANCING WOUND HEALING, filed April 18, 2001, and assigned U.S. Serial Number 09/807,793; this assignment 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.

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| IN WITNESS WHEREOF, I hereto set my hand and seal at Rochester, |
|--|
| this 14 day of MAY, 2002. |
| HOLGER G. GASSNER L.S. |
| State of Minnesota: |
| County of Olmsted: ss. |
| Before me this |
| HOLGER G. GASSNER known to me to be the person whose name is subscribed to the |
| foregoing Assignment and acknowledged that he executed the same as his free act and deed for |
| the purposes therein contained. |
| KATHRYN V. HYKE Notary Public Minnesota My Commission Expires Jan. 31, 2005 My Commission Expires Jan. 31, 2005 My Commission Expires: August 1 My Commission Expires: August 2 My Commission Expires: Augu |
| [Notary's Seal Here] |

Attorney Docket No: 07039-171001

| In Witness Whereof, I her | reto set my hand and seal a | Rochester MN |
|---|-----------------------------|---|
| this 8 day of Yhay | | , |
| | DAVID A. SHERRIS | L.S. |
| State of Minnesott : : ss. | | |
| : ss. County of <u>Odmstev</u> : | | |
| Before me this | day of | , 2002, personally appeared |
| Assignment and acknowledged that | | |
| purposes therein contained. | | |
| Deanne Gill Notary Public Minnesota My Cummission Expires Jan. 31, 2005 | Notary Public | pires: 1-31-2005 |
| [Notary's Seal Here] | | |

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RECORDED: 05/22/2002