R SHEET U.S. DEPARTMENT OF COMM Patent and Trademark Patent a		09-06-20U	<u> </u>
To the Honorable Commission	(Rev. 3/01)		
To be Honorabe Commission. 102212947 MNI-249 V V	OMB No. 0651-0027 (exp. 5/31/2002)		, alone and Trademark Office
1. Name of conveying party(ies): 1. Rory A. J. Curtis 2. Maria Alexandra Glucksmann 3. Rachel E. Meyers 9.3. C. Internal Address: Interna	Tab settings ⇔⇔⊽	4 0001 001	7 MNI-249 ∇ ∇ ∇
1. Name of conveying party(ies): 1. Rory A. J. Curtis 2. Maria Alexandra Glucksmann 3. Rachel E. Meyers 9	To the Honorable Commission.	UZZ IZ 37	Phose cord the attached original documents or copy thereof.
Name: Millennium Pharmaceuticals, Inc. Name: Millennium Pharmaceuticals, Inc. Internal Address:			
Maria Alexandra Glucksmann	I) Rory A. I. Curtis		
Additional name(s) of conveying party(ies) attached? □ Yes ☑ No Nature of conveyance ② Assignment □ Merger □ Security Agreement □ Change of Name □ Other □ City: Cambridge State: MA ZIP: 0213 Additional name(s) & address(es) attached? □ Yes ☑ No City: Cambridge State: MA ZIP: 0213 Additional name(s) & address(es) attached? □ Yes ☑ No Additional name(s) & address(es) attached? □ Yes ☑ No Additional name(s) & address(es) attached? □ Yes ☑ No Additional name(s) & address(es) attached? □ Yes ☑ No Additional name(s) & address(es) attached? □ Yes ☑ No Additional name(s) & address(es) attached? □ Yes ☑ No Additional name(s) & address(es) attached? □ Yes ☑ No Additional name(s) & address(es) attached? □ Yes ☑ No B. Patent No.(s) Additional numbers attached? □ Yes ☑ No Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address:		_	Maria edicais, inc.
Assignment		9.3.02	Internal Address:
3. Nature of conveyance	Additional name(s) of conveying narty(ies) atta	ched? □ Ves 🖾 No	
City: Cambridge State: MA ZIP: 0213 Sexecution Date: 1) August 20, 2002 2) August 13, 2002 3) August 13, 2002 4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: A. Patent Application No.(s) B. Patent No.(s) 10/154,419 Additional numbers attached? Yes No Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. 7. Total fee (37 CFR 3.41)\$ 40.00 Internal Address: Lahive & Cockfield, LLP Do Not Use This space City: Boston State: MA ZIP: 02109 12-0080 (Attach duplicate copy of this page if paying by deposit account) Do Not Use This space Date		Clied: Dires MINO	
City: Cambridge State: MA ZIP: 0213 Additional name(s) & address(es) attached?		☐ Merger	Street Address: 75 Sidney Street
Additional name(s) & address(es) attached? \[\text{Yes} \] No Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: A. Patent Application No.(s) 10/154.419 Additional numbers attached? \[\text{Yes} \] No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address: \[\text{Lahive} \) & Cockfield, LLP Street Address: \[\text{28 State Street} \] City: \[\text{Boston} \] State: \[\text{MA} \] ZIP: \[\text{02109} \] PO NOT USE THIS SPACE 3. 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. \[\text{10.9(b)} \] Name of Person Signing Signature Total number of pages including cover sheet, attachments, and document: 5. Total number of pages including cover sheet, attachments, and document: 5. Total number of pages including cover sheet, attachments, and document: 5. Total number of pages including cover sheet, attachments, and document: 5. Total number of pages including cover sheet, attachments, and document:	☐ Security Agreement	☐ Change of Name	
2) August 13, 2002 2) August 13, 2002 3) August 13, 2002 4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: A. Patent Application No.(s) 10/154,419 Additional numbers attached? Yes No 6. Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address: Lahive & Cockfield, LLP	□ Other	7.	City: Cambridge State: MA ZIP: 02139
A. Patent Application No.(s) A. Patent Application No.(s) B. Patent No.(s) Additional numbers attached? Pes No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address: Lahive & Cockfield, LLP Street Address: 28 State Street City: Boston State: MA ZIP: 02109 DO NOT USE THIS SPACE 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. \$10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document. 5. Total number of pages including cover sheet, attachments, and document. 5. Total number of the execution date of the application is: B. Patent No.(s) B. Patent No.(s) No. Additional numbers attached? Pes No. 6. Total number of applications and patents involved: 7. Total fee (37 CFR 3.41)	2) August 13, 200	02	Additional name(s) & address(es) attached? ☐ Yes ☑ No
A. Patent Application No.(s) A. Patent Application No.(s) Additional numbers attached? Per Security No. S. Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address: Lahive & Cockfield, LLP Street Address: 28 State Street City: Boston State: MA ZIP: 02109 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document. Signature Signature Signature To the Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document.	4. Application number(s) or patent nu	ımber(s):	
A. Patent Application No.(s) 10/154,419 Additional numbers attached? Yes No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address: Lahive & Cockfield, LLP Street Address: 28 State Street City: Boston State: MA ZIP: 02109 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: 12.0002 LNUELLER 00000104 120080 10154419		. ,	
Additional numbers attached? Solve No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address: Lahive & Cockfield, LLP Street Address: 28 State Street City: Boston State: MA ZIP: 02109 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. \$10.9(b) Name of Person Signing Total number of applications and patents involved: 7. Total fee (37 CFR 3.41)\$40.00 Solve Enclosed Authorized to be charged to deposit account number: 12-0080 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. \$10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: 5. Signature Date Total number of applications and patents involved: Authorized to be charged to deposit account mumber: 12-0080 (Attach duplicate copy of this page if paying by deposit account) Do NOT USE THIS SPACE	If this document is being filed together	with a new application, t	he execution date of the application is:
Additional numbers attached? Yes No 5. Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address: Lahive & Cockfield, LLP Street Address: 28 State Street City: Boston State: MA ZIP: 02109 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. \$10.9(b) Name of Person Signing Total number of applications and patents involved: 7. Total fee (37 CFR 3.41)\$40.00 Example Internal Address: 240.00 Authorized to be charged to deposit account number: 12-0080 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. \$10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document. 5. Total number of applications and patents involved: Authorized to be charged to deposit account mumber: 12-0080 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. \$10.9(b) Name of Person Signing Total number of applications and patents involved: Total number of applications and patents involved: Authorized to be charged to deposit account mumber: Total number of applications and patents involved: Total number of applications and patents involved: Total number of applications and patents involved: Total number of applications and patents involve	A Patent Application No.(s)		R Patent No.(s)
Additional numbers attached?			<i>B.</i> 1 dione No.(3)
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Amy E. Mandragouras, Esq. Internal Address: Lahive & Cockfield, LLP Street Address: 28 State Street City: Boston State: MA ZIP: 02109 DO NOT USE THIS SPACE 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of applications and patents involved: 7. Total fee (37 CFR 3.41)\$ 40.00 Authorized to be charged to deposit account number: 12-0080 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of applications and patents involved: 7. Total fee (37 CFR 3.41)\$ 40.00 Authorized to be charged to deposit account 8. Deposit account number: 12-0080 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of applications and patents involved: 7. Total fee (37 CFR 3.41)\$ 7. Total fee (37 CFR 3.41)\$ PLONE IN			
Name: Amy E. Mandragouras, Esq. Internal Address: Lahive & Cockfield, LLP Street Address: 28 State Street City: Boston State: MA ZIP: 02109 DO NOT USE THIS SPACE D. 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: //2002 LHUELLER 00000104 120080 10154419 7. Total fee (37 CFR 3.41)\$ 40.00 Authorized to be charged to deposit account 8. Deposit account number: 12-0080 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE 3. 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. Signature Date Total number of pages including cover sheet, attachments, and document: 5			
Internal Address: Lahive & Cockfield, LLP Street Address:28 State Street City:BostonState:MAZIP:02109			6. Total number of applications and patents involved:
Street Address: 28 State Street City: Boston State: MA ZIP: 02109 DO NOT USE THIS SPACE Do Not use this page if paying by deposit account) DO NOT USE THIS SPACE Do Not use this page if paying by deposit account) Do Not use this space Do Not use this space Do Not use this page if paying by deposit account) Do Not use this space Do Not use this space Do Not use this page if paying by deposit account) Do Not use this space Do Not use this page if paying by deposit account) Do Not use this space 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: Signature Date Total number of pages including cover sheet, attachments, and document: 15	Name: Amy E. Mandragouras,	Esq.	7. Total fee (37 CFR 3.41)\$ 40.00
Street Address: 28 State Street City: Boston State: MA ZIP: 02109 DO NOT USE THIS SPACE 3. 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: MEDITOR 12-0080 (Attach duplicate copy of this page if paying by deposit account) Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: MEDITOR 12-0080 MA ZIP: 02109 12-0080 (Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE 3. 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document:	Internal Address:Lahive & Cockfi	eld, LLP	⊠ Enclosed
City: Boston State: MA ZIP: 02109 DO NOT USE THIS SPACE D. 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: Signature Total number of pages including cover sheet, attachments, and document: Date Total number of pages including cover sheet, attachments, and document:			☐ Authorized to be charged to deposit account
(Attach duplicate copy of this page if paying by deposit account) DO NOT USE THIS SPACE D. 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: Section 1. Statement and signature and correct and any attached copy is a true copy of the original document. Signature Date Total number of pages including cover sheet, attachments, and document: Section 2. 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.	Street Address: 28 State Street		8. Deposit account number:
DO NOT USE THIS SPACE 3. 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: 72002 LINIELLER 00000104 120080 10154419	City: Boston State: MA	ZIP: <u>02109</u>	
P. 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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: Signature Total number of pages including cover sheet, attachments, and document:		DO NOT USE	
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. Maria Laccotripe Zacharakis, Ph.D., Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: 72002 LINIELLER 00000104 120080 10154419			
Limited Recognition Under 37 C.F.R. §10.9(b) Name of Person Signing Total number of pages including cover sheet, attachments, and document: /2002 LINUELLER 00000104 120080 10154419	To the best of my knowledge and belie	f, the foregoing informat	ion is true and correct and any attached copy is a true copy of
Name of Person Signing Signature Date Total number of pages including cover sheet, attachments, and document: Total number of pages including cover sheet, attachments, and document: 5 5 5 5 5 5 5 5 5			
Total number of pages including cover sheet, attachments, and document: /2002 LINUELLER 00000104 120080 10154419			Acutyre 2002
/LOVE EMPELLER VOVOVIOT ICOVOV IVISTAI?	Limited Recognition Under 37	C.F.R. §10.9(b) 🔻	· · · · · · · · · · · · · · · · · · ·
	Limited Recognition Under 37 Name of Person Signing	C.F.R. §10.9(b) Signa	ature Date
.;361 1 0.4VV LN	Limited Recognition Under 37 Name of Person Signing Total num	C.F.R. §10.9(b) Signa	ature Date er sheet, attachments, and document:

PATENT REEL: 013251 FRAME: 0770

ASSIGNMENT

We, Rory A.J. Curtis, of Southborough, MA; Maria Alexandra Glucksmann, of Lexington, MA; and Rachel E. Meyers, of Newton, MA in consideration of One Dollar and other valuable consideration paid to me us:

Millennium Pharmaceuticals, Inc.

a corporation of Delaware, having its principal place of business at 75 Sidney Street, Cambridge, MA 02139, the receipt of which is hereby acknowledged, do hereby sell, assign and transfer unto said:

Millennium Pharmaceuticals, Inc.

its successors and assigns, the entire interest for the United States of America and all foreign countries including all rights of priority under the International Convention for the Protection of Industrial Property in a certain invention or improvement in:

NOVEL 38594, 57312, 53659, 57250, 63760, 49938, 32146, 57259, 67118, 67067, 62092, 8099, 46455, 54414, 53763, 67076, 67102, 44181, 67084FL, 67084ALT, FBH58295FL, 57255, AND 57255ALT MOLECULES AND USES THEREFOR

described in an application:

____ executed by me of even date herewith and about to be filed ____ X_ Serial No. 10/154,419, filed on May 22, 2002

in the United States Patent and Trademark Office, and in all Letters Patent of the United States and all foreign countries which may or shall be granted on said invention, or any parts thereof, or on said application, or any divisional, continuing, reissue or other applications based in whole or in part thereon. And we agree, for ourselves and our executors and administrators, with said corporation and its successors and assigns but at its or their expense and charges, hereafter to execute all applications, amended specifications, deed or other instrument, and to do all acts necessary or proper to secure the grant of Letters Patent in the United States and in all other countries to said corporation, with specifications and claims in such form as shall be approved by the counsel of said corporation and to vest and confirm in said corporation, its successors and assigns, the legal title to all such patents.

And we do hereby authorize and request the Commissioner of Patents and Trademarks of the United States to issue such Letters Patent as shall be granted upon said application or applications based thereon to said corporation, its successors and assigns.

WITNESS my hand and seal this 22th day of 2 August, 2002.

By: Zer City

Rory A.J. Curtis

PATENT REEL: 013251 FRAME: 0771

State of Massachusetts)		
County of Mddlese) ss (x)		
Then personally appeared instrument to be his free act	the above r t and deed, be	named l	Rory A.J. Curtis and acknowledged the foregoing e, this School, 2002.
			Notary Public My Commission Expires: May 1, 2009
WITNESS my hand and se	al this	day	of
		By:	
		•	Maria Alexandra Glucksmann
State of Massachusetts)		
County of) ss)		
			Notary Public My Commission Expires:
WITNESS my hand and se	eal this	day	of, 2002.
		By:	Rachel E. Meyers
State of Massachusetts)		
County of) ss)		
Then personally appeared instrument to be his free ac	the above retand deed, b	named i	Rachel E. Meyers and acknowledged the foregoing te, this day of, 2002.
			Notary Public My Commission Expires:

State of Massachusetts)) ss		
County of)		
Then personally appeared instrument to be his free act	the above named and deed, before	d Rory A.J. Curtis and acknowled me, this day of	dged the foregoing, 2002.
		Notary Public My Commission Expires:	
WITNESS my hand and sea	al this <u>× /3</u> d	lay of August, 2002.	
	Ву	y: × MUSGULL Maria Alexandra Glucksman	
State of Massachusetts)	Maria Alexandra Glucksman	ın
State of Massachusetts County of Middless) ss ×)	/	
Then personally appeared foregoing instrument to be	the above named his free act and de	Maria Alexandra Glucksmann and eed, before me, this day of	d acknowledged the
		Notary Public CO	
		My Commission Expires:	<u>a, 1, 2001</u>
WITNESS my hand and se	al this o	day of, 2002.	NASIM G. MEMON Notary Public Commonwealth of Massachusetts My Commission Expires May 1, 2009
	В	y:	
G	,	Rachel E. Meyers	
State of Massachusetts)) ss		
County of)		
Then personally appeared instrument to be his free ac	I the above name at and deed, before	ed Rachel E. Meyers and acknowle me, this day of	edged the foregoing, 2002.
		Notary Public My Commission Expires:	

)) ss			
ounty of)			
			Curtis and acknowledged the fo	regoing
		Notary Pub My Comm	lic ission Expires:	
VITNESS my hand and se	al this	day of	, 2002.	
		By:	Alexandra Glucksmann	
tate of Massachusetts)	ivediati i		
County of) ss			
		Notony Bul	dia	
		Notary Pul My Comm	ission Expires:	
VITNESS my hand and se	al this <u>× /</u>	$\frac{3}{2}$ day of \times	, 2002.	
		By: × Roe	lel Muzu E. Meyers	
		Dashal	F Mewers	
state of Massachusetts)	Rachei	E. Meyers	
State of Massachusetts County of Middless)) ss ⋺≻)	Kacnei	E. Meyers	
State of Massachusetts County of Middlesce Then personally appeared instrument to be his free ac	the above i	named Rachel E. N	Meyers and acknowledged the following day of <u>Rwws</u> , 2002.	oregoing
County of Middlesc	the above i	named Rachel E. Nefore me, this 12	Neyers and acknowledged the fo day of <u>Aいいら</u> , 2002.	
County of Middlesc	the above i	named Rachel E. Nefore me, this 12	Meyers and acknowledged the fo	

-2-

Notary Public
Commonwealth of Massachusetts
My Commission Expires
May 1, 2009
PATENT

REEL: 013251 FRAME: 0774

BEFORE THE OFFICE OF ENROLLMENT AND DISCIPLINE UNITED STATE PATENT AND TRADEMARK OFFICE

LIMITED RECOGNITION UNDER 37 CFR § 10.9(b)

Maria C. Laccotripe Zacharakis is hereby given limited recognition under 37 CFR §10.9(b) as an employee of Lahive & Cockfield, LLP, to prepare and prosecute patent applications where the patent applicant is the client of Lahive & Cockfield, LLP, and the attorney or agent of record in the applications is a registered practitioner who is a member of the Lahive & Cockfield, LLP. This limited recognition shall expire on the date appearing below, or when whichever of the following events first occurs prior to the date appearing below: (i) Maria C. Laccotripe Zacharakis ceases to lawfully reside in the United States, (ii) Maria C. Laccotripe Zacharakis ceases to remain or reside in the United States on an H-1 visa.

This document constitutes proof of such recognition. The original of this document is on file in the Office of Enrollment and Discipline of the U.S. Patent and Trademark Office.

Expires: August 5, 2003

RECORDED: 09/03/2002

Harry I. Moatz

Director of Enrollment and Discipline

PATENT REEL: 013251 FRAME: 0775