22-2002 04:26pm

Form PTO-159S RECORDATION FORM COVER SHEET U.S. DEPARTMENT OF COMMERCE (Rev. 03/01) U.S. Patent and Trademark Office							
OMB No. 0651-0027 (exp. 5/31/2002)  PATENTS ONLY							
Tab settings ⇔ ⇔ ♥	▼ ♥	<u> </u>	▼ ▼				
To the Honorable Commissioner	of Patents and Trademarks:	Please record the attached	original documents or copy thereof.				
<ol> <li>Name of conveying party(ies):</li> </ol>		Name and address of receiving party(ies)					
Frederick Earl Boyer, Jr. John Michael Domagala		Name: Warner-Lambert Company					
Edmund Lee Ellsworth		Internal Address:					
Christopher Andrew Gajda							
Additional name(s) of conveying party(ies)	attached? 🛂 Yes 📮 No						
3. Nature of conveyance:							
🖾 Assignment	🖳 Merger						
☐: Security Agreement	Change of Name	Street Address: 201 Tabor Road					
	_						
🛄 Other							
		City: Morris Plains	SState: NJ Zip: 07950				
Execution Date: Various		Additional name(s) & a	address(es) attached? 🛄 Yes 🖳 No				
4. Application number(s) or patent	: number(s):	•					
If this document is being filed to	gether with a new appli	cation, the execution d	late of the application is:				
A. Patent Application No.(s)		B. Patent No.(s)					
09/641,260							
	Additional numbers at	 ached? 📮 Yes 🔼 No					
5. Name and address of party to v			plications and patents involved:				
concerning document should be mailed:							
Name: Heidi M. Berven		7. Total fee (37 CFR 3.41)\$_40.00					
		□ Enclosed					
Internal Address: Wamer-Lambo	rt Company		1				
Patent Departm	ent	Authorized to	be charged to deposit account				
			<del></del>				
Street Address: 2800 Plymouth Road		8. Deposit account number:					
		23-0455					
	<del>-</del>	(Attach dualicate conv.)	of this page if paying by deposit account)				
City: <u>Ann Arbor</u> State: <u>MI</u>	Zip:_48105	(Attach dephoses copy	or and page if paying by doposit dood				
DO NOT USE THIS SPACE							
9. Statement and signature.							
To the best of my knowledge an		nformation Atrue and	correct and any attached copy				
is a true copy of the original dod	ument.	V/h	< 22 Nev 2002				
Heidi M. Berven Name of Person Signing		Signature	Date				
	amber of pages including cover						

Mail documents to be recorded with required cover sheet information to: Commissioner of Patents & Trademarks, Box Assignments Washington, D.C. 20231 From-Pfizer Legal Patents

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T-903 P.002/012 F-528

Recordation Form Cover Sheet

USSN: 09/641,260

Page Two

04:27pm

Name of conveying parties (cont.):

Var Prasad Venkata Nagendra Josyula Elizabeth Ann Lunney Alexander Pavlovsky Bradley Dean Tait

04:27pm From-Pfizer Legal Patents

734 6221553

T-903 P.004/012 F-528

Docket No.	A0000010-01-HMB	
DOCKET NO.	WOOOOO LO-O L-LIMID	

## ASSIGNMENT

As a below-named inventor, I hereby declare that:

My post office address is as stated below under my signature and I am named as an inventor of the inventions or discoveries (herein INVENTIONS) as described in the patent application (herein APPLICATION) identified below. In view of valuable consideration, receipt thereof is hereby acknowledged, I do hereby assign and transfer unto WARNER-LAMBERT COMPANY, a corporation of the State of Delaware, having a place of business at MORRIS PLAINS, NEW JERSEY, its successors and assigns, my entire interest in and the full exclusive right to the INVENTIONS, the APPLICATION and all related applications (including provisionals, divisions, reissues, continuations, and extensions thereof) and all counterparts in other countries and any and all Letters Patent (and certificates of invention or similar certificates) (herein PATENTS) which may be granted based upon the INVENTIONS or the APPLICATION or related applications or counterparts in other countries; said transfer and assignment being applicable throughout the world. I hereby authorize and request officials of patent offices in any and all countries of the world to issue any and all of the PATENTS, when granted, to WARNER-LAMBERT COMPANY, its successors and assigns, as the assignee of my entire right, title and interest in and to the same. I agree that I will communicate to WARNER-LAMBERT COMPANY, or its representatives, any facts known to me respecting the invention; testify in any legal proceedings; sign all lawful papers; execute all provisional, divisional, continuation, substitution, renewal and reissue applications; execute all necessary assignment papers to cause any and all of the PATENTS to be issued to WARNER-LAMBERT COMPANY; make all rightful oaths; and generally do everything possible to aid WARNER-LAMBERT COMPANY, its successors and assigns, to obtain and enforce proper protection for the INVENTION in any and all countries throughout the world. The APPLICATION is identified herein.

Serial No. (if known)	: _	09/641,260	
Filing Date (if known)	: _	8/17/2000	
Execution Date(s) of Application	: _		

Title: HIV PROTEASE INHIBITORS

FULL NAME OF INVENTOR: FREDERICK EARL BOYER, JR.

Inventor's signature

Residence

Canton Township, Michigan 48188 United States

Citizenship

United States

Post Office Address

: 482 Pleasant Ridge Drive

Canton Township, Michigan 48188 United States

STATE OF Michigan

COUNTY OF Washtenaw

\_ , the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free acts and

deeds in and for the purpose set forth in said instrument.

My Commission Expires:

Beth N. Gaines Notary Public, Wayne County, W My Commission Expires Mar. 7, 2003 Acting in Washtenaw County

FULL NAME OF INVENTOR : JOHN MICHAEL DOMAGALA

Inventor's signature

Residence

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Canton, Michigan 48187 United States

STATE OF Michigan

COUNTY OF Washtenaw

On \_\_\_\_\_\_\_, the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free acts and deeds in and for the purpose set forth in said instrument.

SEATO TO THE TOTAL OF THE PARTY OF THE PARTY

My Commission Expires:

Beth N. Gaines
Notary Public, Wayne County, ME
My Commission Expires Mac. 7, 2003
Acting in Washtenaw County

FULL NAME OF INVENTOR: EDMUND LEE ELLSWORTH

Inventor's signature

Residence

Date: 0 125 2002

Brighton, Michigan 48116 United States

Citizenship

Post Office Address

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Brighton, Michigan 48116 United States

STATE OF Michigan

COUNTY OF Washtenaw

\_\_\_\_, the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free acts and deeds in and for the purpose set forth in said instrument.

My Commission Expires:

Notary Public, Wayne County, MI My Commission Expires Mat. 7, 2003 Acting in Washtenaw County

734 6221553

FULL NAME OF INVENTOR : CHRISTOPHER ANDREW GAJDA

Inventor's signature : Date:

Residence : Ann Arbor, Michigan 48108United States

Citizenship : Canadian

Post Office Address : 6149 Wilson Road

Ann Arbor, Michigan 48108United States

STATE OF Michigan

COUNTY OF Washtenaw

On , ///O , the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free acts and deeds in and for the purpose set forth in said instrument.

(SEAL)

Notary Public

My Commission Expires:

Beth M. Gaines
Notary Public, Wayne County, Mi
My Commission Expires Mar. 7, 2003
Acting in Washtenaw County

FULL NAME OF INVENTOR : VARA PRASAD VENKATA NAGENDRA JOSYULA

Inventor's signature

Una Rasad Nay Kata Nagarda Date: Nov. 12, 2002

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STATE OF Michigan

COUNTY OF Washtenaw

(SEAL)

My Commission Expires:

Bath N. Gaines Wotary Public, Wayne County, NE My Commission Expires Mar. 7, 2003 Acting in Westingson County FULL NAME OF INVENTOR : ELIZABETH ANN LUNNEY

Inventor's signature

Residence

Date: Oct. 20, 2002 San Diego, CA 92130 United States

Citizenship

: United States

Post Office Address

: 4205 Calle Mejillones

San Diego, CA 92130 United States

STATE OF California

2082 the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free acts and deeds in and for the purpose set forth in said instrument.

(SEAL)

BONNIE ACOSTA Comm. # 1283327 NOTARY PUBLIC - CALIFORNIA DSAN Diego County My Comm. Expires Dec. 6, 2004

My Commission Expires:

FULL NAME OF INVENTOR : ALEXANDER PAVLOVSKY

Inventor's signature

: flexander Parlovshy Date: /1-04-02 : Ann Arbor, Michigan 48104 United States

Residence

Citizenship

: United States

Post Office Address

: 1323 Pine Valley Court

Ann Arbor, Michigan 48104 United States

STATE OF Michigan

COUNTY OF Washtenaw

\_\_\_\_\_, the above-named inventor personally appeared before me and executed the foregoing instrument and acknowledged the same to be his/her free acts and deeds in and for the purpose set forth in said instrument.

My Commission Expires:

Notary Public, Wayne County, MI My Commission Expires Mar. 7, 2003 Acting In Washtenaw County

**RECORDED: 11/22/2002**