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To the Honorable Commissioner for Pa	cument(s) or copy(ies) thereof.
1. Name of Conveying Party(ies): 1022186	650
INVENTORS, Francis Goudaliez, Thierry V	/erpoort
Additional name(s) of conveying party(ies) atta	ched? Yes X No
Name and Address of Party(ies) receiving an interest (assignee(s	
Name: Maco Pharma	10/149665
Address: Rue Lorthiois	. ////
59420 Mouvaux	4
Country: FRANCE	
Additional name(s) and address(es) attached?	Yes X No
2. Application number(s) or patent number(s): If this document is being filed together with a new application	on the execution date(s) of the new application is: 06/05/02
A. Patent Application No(s).:	B. Patent No(s).:
	2. <u>141011-110[0]</u>
Others on additional sheet(s) attached?	Yes X No
3. Nature of Conveyance:	
X Assignment _ Merger 6-11-	-OZ Change of Name
Verified Translation Security Agreer	
Execution Date: Francis Goudaliez, 06/05/02; Thierry Verpoort	, 06/04/02
4. Name and address of party to whom correspondence	5. Total number of applications and patents involved:
concerning document should be mailed:	Application(s): 1
R. William Beard, Jr. BAKER BOTTS L.L.P.	+ Patent(s):
One Shell Plaza	
910 LOUISIANA STREET	6. Total Fee (37 C.F.R. § 3.41) \$40.00
Houston, Texas 77002-4995 713.229.1176	Authorized to be charged to Deposit Account
713.229.2876	7. Deposit Account No.: 02-0383
	(Duplicate copy of this sheet attached)
	X Charge any underpayment or credit
	any overpayment to above Deposit Account
	E THIS SPACE
8. Statement and Signature  To the best of my knowledge and belief the foregoing infor-	mation is true and correct and any attached copy is a true copy of
the original document.	mation is true and correct and any attached copy is a true copy of
R. William Beard, Jr., Reg. No. 39,903	June 10, 2002
Name of Person Signing S	ignature Date
Total number of pages including cover sheet, attachments, an	d document: 3 Pages (w/ duplicate copy for fee processing)
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## ASSIGNMENT

For good and viluable consideration, the receipt and sufficiency of which is hereby acknowledged, I/we, the below signed in 'shtor a) of record, hereby assigns to:

> MACOPHARMA RUE LORTHIOLS **59420 MOUVAUX** FRANCE

and its successo a and issigns (collectively hereinafter called "the Assignee"), the entire right, fitle and interest throughout the . orld; the inventions and improvements which are the subject of an application for United States Parent signed bome this day, entitled:

## "Unit for Filtering a Fluid"

this assignment nelic ne said application, any and all Limited States and foreign patents, unitry models, design registrations, in enter a certificates and other similar rights granted for any of said inventions or improvements, and the right to Jaim morely based on the filing date of said application under the International Convention for the Protection of Indianial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like p aposes; and I authorize the Assignee to apply in all committee in my name, or in its own name, for patems, util y models, design registrations and like rights of exclusion and for inventors' comfignies for said inventions an improvements; and I agree for myself and my hear, legal representatives and assigns, without further compa isstion to perform such lawful acts and to sign such further applications, assignments. Preliminary Statement and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment

IN WITNESS T IERI DF, I hereby set my hand, date of signature and place of signature as indicated below.

Full Nume of F: st Inv mor: FRANCIS GOUDALIEZ Residence! 389 Avenue du Marechal Leclerc. 59155 Faches-Thumesno, France FRENCH Crnzenship: Post Office Add ess 389 Avenue du Marechal Leclerc. 59155 FACHES-THUMESHIL, FRANCE 5/06/2002. Signature of Fig. 1 Inve dor In the City of \_\_\_\_\_ In the Country of \_\_\_\_\_ Before me, se undersigned authority, on this \_day of \_ , personally appeared ... known to me to be the person whose name is subscribed to the foregoing manument and acknowleds ad to me that he executed the same of his own free will for the purposes and consideration therein expresse l Notary or Consular Officer

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PATENT

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Full Name of Second Inventor

THIERRY VERPOORT

Residence.

19 RUE DE BAINIEUX

59420 MOUVAUX, FRANCE

Cinzenship:

FRENCH

Post Office Ad Iress:

19 RUE DE BAISIEUX 59420 MOUVAUX, FRANCE

Signance of Second wenter

Date of Signature

in the City of \_\_\_\_\_\_ §

In the Country of \_\_\_\_\_ §

Before me, he undersigned authority, on this \_\_\_\_\_ day of \_\_\_\_\_\_, personally appeared \_\_\_\_\_, known to me to be the person whose name as subscribed to the foregoing instrument and acknowled ged u me that he executed the same of his own free will for the purposes and consideration therein express id.

Notary or Consular Officer

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**RECORDED: 06/11/2002** 

PATENT REEL: 013263 FRAME: 0829