OMB_No. 0651-0027 (exp. 6/30/2005)	United States Patent and Trademark Office
RECORDATION FOR	
PATENTS ONLY	
To the Director of the U.S. Patent and Trademark Office: Pleas	se record the attached documents or the new address(es) below.
1. Name of conveying party(ies)/Execution Date(s):	Name and address of receiving party(ies)     Name: NMT Medical, Inc.
Andrzej J. Chanduszko	Internal Address:
Execution Date(s) 09/17/2004  Additional name(s) of conveying party(ies) attached? Yes No	Street Address:27 Wormwood Street
3. Nature of conveyance:  Assignment	City:Boston
Security Agreement Change of Name	State: MA
Government Interest Assignment Executive Order 9424, Confirmatory License	Country: USA Zip: 02210
Other	Additional name(s) & address(es) attached? Yes
Additional numbers at 5. Name and address to whom correspondence	iached? Yes No
o. Hante and addices to mioni conception	6. Total number of applications and patents
concerning document should be mailed:	involved: 1
concerning document should be mailed: Name: Wilmer Cutter Pickering Hale and Dom LLP	
concerning document should be mailed:	7. Total fee (37 CFR 1.21(h) & 3.41) \$\frac{40.00}{}\$  Authorized to be charged by credit card
concerning document should be mailed: Name: Wilmer Cutter Pickering Hale and Dom LLP	7. Total fee (37 CFR 1.21(h) & 3.41) \$\frac{40.00}{\text{ Authorized to be charged by credit card}}\$  Authorized to be charged to deposit account Enclosed
Concerning document should be mailed:  Name: Wilmer Cutter Pickering Hale and Dom LLP  Internal Address: David L. Cavanaugh  Street Address: 60 State Street	involved:  7. Total fee (37 CFR 1.21(h) & 3.41) \$\frac{40.00}{}\$  Authorized to be charged by credit card  Authorized to be charged to deposit account  Enclosed  None required (government interest not affecting tills)
Concerning document should be mailed:  Name: Wilmer Cutter Pickering Hale and Dom LLP  Internal Address: David L. Cavanaugh  Street Address: 60 State Street  City: Boston	involved:  7. Total fee (37 CFR 1.21(h) & 3.41) \$\frac{40.00}{}\$  Authorized to be charged by credit card  Authorized to be charged to deposit account  Enclosed  None required (government interest not affecting tills)  8. Payment Information
Concerning document should be mailed:  Name: Wilmer Cutter Pickering Hale and Dom LLP  Internal Address: David L. Cavanaugh  Street Address: 60 State Street  City: Boston  State: MA Zip: 02109	involved:  7. Total fee (37 CFR 1.21(h) & 3.41) \$\frac{40.00}{}\$  Authorized to be charged by credit card  Authorized to be charged to deposit account  Enclosed  None required (government interest not affecting tills)
Concerning document should be mailed:  Name: Wilmer Cutter Pickering Hale and Dom LLP  Internal Address: David L. Cavanaugh  Street Address: 60 State Street  City: Boston  State: MA Zip: 02109  Phone Number: (617) 526-6036	involved:  7. Total fee (37 CFR 1.21(h) & 3.41) \$\frac{40.00}{\text{ Authorized to be charged by credit card}}  Authorized to be charged to deposit account  Enclosed  None required (government interest not affecting title)  8. Payment Information  a. Credit Card Last 4 Numbers
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Name: Wilmer Cutter Pickering Hale and Dom LLP  Internal Address: David L. Cavanaugh  Street Address: 60 State Street  City: Boston  State: MA Zip: 02109  Phone Number: (617) 526-6036  Fax Number: (617) 526-5000  Email Address: 9. Signature:	involved: 1  7. Total fee (37 CFR 1.21(h) & 3.41) \$\frac{40.00}{}\$  Authorized to be charged by credit card  Authorized to be charged to deposit account  Enclosed  None required (government interest not affecting tills)  8. Payment Information  a. Credit Card Last 4 Numbers Expiration Date  b. Deposit Account Number  Authorized User Name  David L. Cavanaug  01/26/2005
Concerning document should be mailed:  Name: Wilmer Cutter Pickering Hale and Dom LLP  Internal Address: David L. Cavanaugh  Street Address: 60 State Street  City: Boston  State: MA Zip: 02109  Phone Number: (617) 526-6036  Fax Number: (617) 526-5009  Email Address:	7. Total fee (37 CFR 1.21(h) & 3.41) \$40.00  Authorized to be charged by credit card  Authorized to be charged to deposit account  Enclosed  None required (government interest not affecting title)  8. Payment Information  a. Credit Card Last 4 Numbers Expiration Date  b. Deposit Account Number  O8-0219  Authorized User Name  David L. Cavanaug

01/26/2005

PATENT

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## ASSIGNMENT

WHEREAS, I, Andrzej J. Chanduszko, being a citizen of United States of America, residing at 311 N. Carriage Lane, Chandler, Arizona 85224, am an inventor of certain new and useful inventions and discoveries, for which I have made an application for Letters Patent entitled Tubular Patent Foramen Ovale (PFO) Closure Device With Catch System which nonprovisional patent application was filed in the United States Patent and Trademark Office on July 14, 2004 and assigned Serial No. 10/890,784; and

WHEREAS, NMT Medical, Inc., a Delaware corporation, whose address is 27 Wormwood Street, Boston, Massachusetts 02210, together with its successors and assigns is hereinafter called "ASSIGNEE," is desirous of acquiring the title, rights, benefits, and privileges hereinafter recited.

NOW, THEREFORE, for and in consideration of good and valuable consideration furnished by ASSIGNEE to me, receipt and sufficiency of which I hereby acknowledge, I hereby, without reservations:

- 1. Assign, transfer, and convey to ASSIGNEE the entire right, title, and interest in and to said inventions and discoveries, said application for Letters Patent, any and all other applications for Letters Patent on said inventions and discoveries in whatsoever countries, including all divisional, renewal, substitute, continuation, continuation-in-part, and convention applications based in whole, or in part, upon said inventions or discoveries, or upon said applications, and any and all Letters Patents, reissues, and extensions of Letters Patent granted for said inventions and discoveries or upon said applications, and every priority right that is or may be predicated upon, or arise from, said inventions, said discoveries, said applications, and said Letters Patent;
- 2. Authorize ASSIGNEE to file patent applications in any or all countries on any or all of said inventions and discoveries in my name or in the name of ASSIGNEE or otherwise as ASSIGNEE may deem advisable, under International Conventions or otherwise;

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- 3. Authorize and request the Commissioner of Patents and Trademarks of the United States of America and the empowered officials of all other governments throughout the world to issue or transfer all said Letters Patents to ASSIGNEE, as assignee of the entire right, title, and interest therein or otherwise as ASSIGNEE may direct;
- 4. Warrant that I have not knowingly conveyed to others any right in said inventions, discoveries, applications, or patents, or any license to use the same, or to make, use, or sell anything embodying or utilizing any of said inventions or discoveries; and that I have good right to assign the same to ASSIGNEE without encumbrance;
- ASSIGNEE's request and at ASSIGNEE's expense, but without additional consideration to me or them, all acts reasonably serving to assure that said inventions and discoveries, said patent applications, and said Letters Patents shall be held and enjoyed by ASSIGNEE as fully and entirely as the same could have been held and enjoyed by me, my heirs, legal representatives, and assigns if this Assignment had not been made; and particularly to execute and deliver to ASSIGNEE all lawful application documents including petitions, specifications, and oaths, and all assignments, disclaimers, and lawful affidavits in form and substance as may be requested by ASSIGNEE; and to communicate to ASSIGNEE all facts known to me relating to said inventions and discoveries or the history thereof, and to testify as to the same in any court or proceeding; and to furnish ASSIGNEE any and all documents, photographs, models, samples, and other physical exhibits in our control or in the control of my heirs, legal representatives, or assigns which may be useful for establishing the facts of my conceptions, disclosures, and reduction to practice of said inventions and discoveries.

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IN TESTIMONY WHEREOF, I have hereunto set my hand and seal.

9/17/04 \_\_\_\_\_\_\_A. Chanduszko

Andrzej J. Chanduszko Date

State of Anizona )

County of Maricopa

On this 17 day of 5 ept., 2004, before me, the undersigned notary public, personally appeared Andrzej J. Chanduszkó, proved to me through satisfactory evidence of identification, to be the person whose name is signed on the preceding or attached document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his/her knowledge and belief.

AMBER D. O'BRIEN Notary Public - Arizona Marlcopa County My Commission Expires November 24, 2007

Amba OB gue\_
Notary Public
My Commission Expires: Nov. 24, 2007

**RECORDED: 01/26/2005**