Form PTO-1595 (Rev. 09/04)
OMB No. 0651-0027 (exp. 6/30/2005)

U.S. DEPARTMENT OF COMMERCE
United States Patent and Trademark Office

RECORDATION FORM COVER SHEET
PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)/Execution Date(s):

Pierre Deslongchamps (11/09/2004), Yves Dory (11/08/2004), Mark Peterson (01/12/2005), Kamel Benakli (11/03/2004),

Execution Date(s): in parentheses after Inventor name

Additional name(s) of conveying party(ies) attached? [X] Yes [ ] No

2. Name and address of receiving party(ies)

Name: TRANZYME PHARMA INC.

Internal Address:

Street Address:

3001 12E Avenue Nord IPS

City: Sherbrooke

State: Quebec

Country: Canada Zip: J1H 5N4

Additional name(s) & address(es) attached? [ ] Yes [X] No

3. Nature of Conveyance:

[X] Assignment
[ ] Merger
[ ] Security Agreement
[ ] Change of Name
[ ] Government Interest Assignment
[ ] Executive Order 9424, Confirmatory License
[ ] Other

4. Application or patent number(s):

[ ] This document is being filed together with a new application.

A. Patent Application No.(s)
10/911,221

B. Patent No.(s)

Additional numbers attached? [ ] Yes [X] No

5. Name and address to whom correspondence concerning document should be mailed:

Name: S. Peter Ludwig
DARBY & DARBY P.C.

Internal Address: Atty. Dkt.: 06670/1201716-US1

Street Address: P.O. Box 5257

City: New York

State: NY Zip: 10150-5257

Phone Number: (212) 527-7770

Fax Number: (212) 753-6237

Email Address: pludwig@darbylaw.com

6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 1.21(h) & 3.41) $ 40.00

[ ] Authorized to be charged by credit card
[X] 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 04-0100
Authorized User Name S. Peter Ludwig

9. Signature:

Jay P. Lessler Reg. No. 41,151 for

Signature

February 3, 2005
Date

S. Peter Ludwig - 25,351
Name of Person Signing

Total number of pages including cover sheet, attachments, and documents: 10

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 306-5995, on the date shown below.

Dated: Signature: ( )

CH $40.00 040100 10911221

Form PTO-1595

RECORDATION FORM COVER SHEET
(continued)

Additional Conveying Party(ies)/Execution Date(s) (1. Continued):

Eric Marsault (11/03/2004), Luc Ouellet (11/03/2004), Mahesh Ramaseshan (11/29/2004), Martin Vézina (11/04/2004), Daniel Fortin (11/15/2004), Ruoxi Lan (12/09/2004), Shigui Li (12/08/2004), Gérald Villeneuve (01/07/2005), Hamid Hoveyda (11/08/2004), and Sylvie Beaubien (11/08/2004)

Additional Assignees (2. Continued):

Assignee Name: _____

Internal Address:

Street Address:

City: _____ State: _____ Country: _____ Zip: _____

Assignee Name: _____

Internal Address:

Street Address:

City: _____ State: _____ Country: _____ Zip: _____

Assignee Name: _____

Internal Address:

Street Address:

City: _____ State: _____ Country: _____ Zip: _____

Additional Applications and/or Patents (4. Continued):

Additional Patent Application Numbers 4A. Continued:	Additional Patent Numbers 4B. Continued:

Additional numbers attached? ☐ Yes ☐ No

Docket No.: 06670/1201716-US1

ROBIC, MONTRÉAL, CANADA

USA-CANADA-WORLDWIDE
CANADA-ÉTATS-UNIS-MONDIALE

CESSION / ASSIGNMENT

Les soussignés (le soussigné): The undersigned:

Pierre DESLONGCHAMPS; Yves DORY; Mark PETERSON; Kamel BENAKLI; Éric MARSAULT; Luc OUELLET; Mahesh RAMASESHAN; Martin VÉZINA; Daniel FORTIN; Ruoxi LAN; Shigui LI; Gérald VILLENEUVE; Hamid HOVEYDA; and Sylvie BEAUBIEN

dont les adresses complètes sont (l'adresse complète est): whose full post office addresses are (address is):

161 de Vimy, Sherbrooke (Québec) J1J 3M6 CANADA; 636 Route 210, Canton d'Eaton Cookshire (Québec) J0B 1M0 CANADA; 3588 rue Alfred-Desrochers, Rock Forest (Québec) J1N 2X1 CANADA; 10736 Saint-Denis, Montreal (Québec) H3L 2J5 CANADA; 540 Meilleur, Sherbrooke (Québec) J1J 2P6 CANADA; 1115 Langevin, Sherbrooke (Québec) J1E 1N2 CANADA; 935 Des Bles Apt. 305, Sherbrooke (Québec), J1E 3J8 CANADA; 4395 Mathy, Rock Forest (Québec) J1N 1R4 CANADA; 6100 Avenue Royalmount, Montreal (Québec) H4P 2R2 CANADA; 382 Massachusetts Ave. Apt. 701, Arlington MA 02474, USA; 382 Massachusetts Ave. Apt. 701, Arlington MA 02474 USA; 810 chemin du Golf, Nun's Island Montreal (Québec) H3E 1A8 CANADA; 615 Victoria St. Apt. 3, Sherbrooke (Québec) J1H 3J4 CANADA; and 4070 Rouleau, Sherbrooke (Québec) J1L 1L5 CANADA.

moyennant la somme de un dollar, payée à nous (moi) par: in consideration of one dollar, to us (me) paid by:

TRANZYME PHARMA INC.

(ci-après appelé cessionnaire) (hereinafter referred to as the assignee)

dont l'adresse postale complète est: whose full post office address is:

3001, 12e Avenue Nord IPS, Sherbrooke (Québec) J1H 5N4, CANADA

dont quittance est par les présentes reconnue, et autres bonnes et valables considérations, nous (je) vendons et cédons (vends et cède) et/ou confirmons (confirme) la vente et la cession par les présentes audit cessionnaire tout notre (mon) intérêt au Canada, aux États-Unis et partout ailleurs à travers le monde, dans et à l'invention afférente à:

receipt of which is hereby acknowledged, and other good and valuable considerations, we (I) do hereby sell and assign and/or confirm such sale and assignment to the said assignee all our (my) right, title and interest in the United States, Canada and everywhere else throughout the world, in and to the invention entitled:

SPATIALLY-DEFINED MACROCYCLIC COMPOUNDS USEFUL FOR DRUG DISCOVERY

telle que décrite en détail et/ou revendiquée: as fully described and/or claimed:

dans le/les brevet(s) américain(s) no(s): ☐ in the United States patent(s) serial No(s).:

dans le/les brevet(s) canadien(s) no(s): ☐ in the Canadian patent(s) serial No(s).:

dans notre (ma) demande de brevet canadienne pour cette invention; ☐ in our (my) Canadian application for a patent for such invention;

dans la demande de brevet américaine que nous avons (j'ai) signée le	☐	In the US application for a patent which we (I) executed on
dans la demande de brevet internationale (PCT) qui a été déposée le	☒	in the International PCT application for a patent which was filed on August 2nd, 2004
sous le numéro	☒	under serial number PCT/CA2004/001439
dans les demandes de brevet américaines qui ont été déposées le	☒	in the US applications which were filed on July 31st, 2003 and August 2nd, 2004
sous les numéros	☒	under serial numbers US 60/491,248 and unknown number respectively
dans la demande de brevet canadienne qui a été déposée le	☐	in the Canadian application for a patent which was filed on
sous le numéro	☐	under serial number
et tous nos (mes) droit, titre et intérêt correspondants dans et à tout brevet qui peut en découler au Canada, aux États-Unis ou ailleurs.	☒	and to all our (my) corresponding right, title and interest in and to any patent which may issue therefor in the United States, Canada or elsewhere throughout the world.

Seules les boîtes ci-haut marquées d'un "X" doivent être considérées.

Nous nous engageons (je m'engage) également à signer tous les documents et formulaires qui pourraient s'avérer nécessaires pour déposer d'autres demandes au Canada, aux États-Unis et ailleurs dans le monde sur cette invention ou sur toute invention décrite dans la demande et/ou brevet, au nom du cessionnaire.

Nous nous engageons (je m'engage) aussi à communiquer au cessionnaire ou ses représentants tous faits concernant cette invention et dont nous avons (j'ai) connaissance; à faire toute déclaration nécessaire, et de façon générale à faire tout ce qui est possible pour aider le cessionnaire, son (ses) successeur(s) et cessionnaire(s), à obtenir et mettre en oeuvre la protection appropriée pour ladite invention au Canada, aux États-Unis et partout à travers le monde.

Only boxes above marked with an "X" are to be considered.

We (I) further agree to execute all the Forms and papers that may be necessary to file other applications in the United States, Canada and everywhere else throughout the world, on the above invention or any invention described in said application(s) and/or patent(s), in the name of the Assignee.

We (I) also agree to communicate to the Assignee or his representatives any facts known to us (me) respecting said invention, make all rightful oaths and generally do everything possible to aid said Assignee, its (his) successors and assignees, to obtain and enforce proper protection for said invention in the United States, Canada and everywhere else throughout the world.

SIGNÉ à/ GNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 9th (jour/day) jour de/ day of NOVEMBER (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Mylène Ledoux

Nom complet/ Full name: MYLÈNE LEDOUX

Pierre Deslongchamps

Pierre DESLONGCHAMPS

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 8th (jour/day) jour de/ day of NOVEMBER (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Mylène Ledoux

Nom complet/ Full name: MYLÈNE LEDOUX

Yves DORY

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 17th (jour/day) jour de/ day of JANUARY (mois/month) 2005 (année/year)

TÉMOIN / WITNESS

Nom complet/ Full name: GINETTE TURCOTTE

Mark PETERSON

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 3rd (jour/day) jour de/ day of NOVEMBER (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Mylène Ledoux

Nom complet/ Full name: MYLÈNE LÉDOUX

Kamel BENAKLI

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 3rd (jour/day) jour de/ day of NOVEMBER (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Mylène Ledoux

Nom complet/ Full name: MYLÈNE LÉDOUX

Éric MARSAULT

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 3rd. (jour/day) jour de/ day of NOVEMBER (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Mylène Ledoux

Nom complet/ Full name: MYLÈNE LÉDOUX

Luc OUELLET

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 4th (jour/day) jour de/ day of November (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Nom complet/ Full name: Kathy V Lachance Jeukat

Mahesh RAMASESHAN

SIGNÉ à/ SIGNED at Sunnyvale (Ville/City) CA (Province) USA (Pays/Country)

Ce/ This 29 (jour/day) jour de/ day of 11 (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Nom complet/ Full name: MYLÈNE LEDOUX

Martin VÉZINA

SIGNÉ à/ SIGNED at Montreal (Ville/City) Quebec (Province) Canada. (Pays/Country)

Ce/ This quinziem (jour/day) jour de/ day of novembr (mois/month) 2004. (année/year)

TÉMOIN / WITNESS

Nom complet/ Full name: NICOLE WILB

Daniel FORTIN

SIGNÉ à/ SIGNED at Arlington (Ville/City) MA (Province) USA (Pays/Country)

Ce/ This 05 (jour/day) jour de/ day of December (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Nom complet/ Full name: Sterla Richter

Ruoxi LAN

SIGNÉ à/ SIGNED at Arlington (Ville/City) MA (Province) USA (Pays/Country)

Ce/ This 8 (jour/day) jour de/ day of December (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Nom complet/ Full name: Katherine Gray

Shigui LI

SIGNÉ à/ SIGNED at Montréal (Québec) Canada (Ville/City) (Province) (Pays/Country)

Ce/ This 7 (jour/day) jour de/ day of Janvier (mois/month) 2005 (année/year)

TÉMOIN / WITNESS

Nom complet/ Full name: Nozha Boukentar

Gérald VILLENEUVE

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 8th (jour/day) jour de/ day of NOVEMBER (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Mylène Ledoux

Nom complet/ Full name: MYLÈNE LEDOUX

Hamid HOVEYDA

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 8th (jour/day) jour de/ day of NOVEMBER (mois/month) 2004 (année/year)

TÉMOIN / WITNESS

Mylène Ledoux

Nom complet/ Full name: MYLÈNE LEDOUX

Sylvie BEAUBIEN

LU ET APPROUVÉ / READ AND APPROVED

SIGNÉ à/ SIGNED at FLEURIMONT (Ville/City) QUÉBEC (Province) CANADA (Pays/Country)

Ce/ This 12th (jour/day) jour de/ day of JANUARY (mois/month) 2005 (année/year)

TRANZYME PHARMA INC.

Par/By:

Nom/Name: MARK L. PETERSON, PH.D.

Titre/Title: VICE PRESIDENT, IP + OPERATIONS