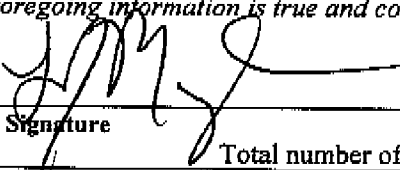


Form PTO-1595  
1-31-92U.S. Department of Commerce  
Patent and Trademark Office**RECORDATION FORM COVER SHEET  
PATENTS ONLY**

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies): (1) Joseph P. Orban, III  Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		2. Name and address of receiving party(ies):  Name: Tyco Healthcare Group LP 150 Glover Avenue Norwalk, CT 06856  Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Nature of conveyance:  <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: (1) 07/19/2004			
4. Application number(s) or patent number(s): 10/801,441 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)	
Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5. Name and address of party to whom correspondence concerning document should be mailed:  Name: Lisa J. Moyles U.S. Surgical, a division of Tyco Healthcare Group LP 150 Glover Avenue Norwalk, CT 06856		6. Total number of applications and patents involved: <b>(1)</b>	
DO NOT USE THIS SPACE		7. Total fee (37 CFR 3.41).....\$40.00	
		<input type="checkbox"/> Enclosed  <input checked="" type="checkbox"/> Authorized to be charged to deposit account	
		8. Deposit account number: 21-0550	
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9. Statement and signature. <i>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.</i>  <div style="display: flex; justify-content: space-between;"> <div>           Lisa J. Moyles, Reg. No. 40.737            Name of Person Signing         </div> <div>             Signature         </div> <div>           2/2/05            Date         </div> </div>			
Total number of pages comprising cover sheet <u>3</u>			

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**PATENT**  
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Form PT 100  
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08-05-2004

U.S. Department of Commerce  
Patent and Trademark Office

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102806637

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

## 1. Name of conveying party(ies):

(1) Joseph P. Orban, III

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

## 3. Nature of conveyance:

☒ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Other

Execution Date: (1) 07/19/2004

## 2. Name and address of receiving party(ies):

Name: Tyco Healthcare Group LP  
150 Glover Avenue  
Norwalk, CT 06856Additional name(s) & address(es) attached? ☐ Yes ☒ No

## 4. Application number(s) or patent number(s): To Be Assigned

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)

Additional numbers attached? ☐ Yes ☒ No

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

Name: Lisa J. Moyles  
U.S. Surgical, a division of  
Tyco Healthcare Group LP  
150 Glover Avenue  
Norwalk, CT 06856

## 6. Total number of applications and patents involved: [1]

DO NOT USE THIS SPACE

## 7. Total fee (37 CFR 3.41).....\$40.00

☐ Enclosed☒ Authorized to be charged to deposit account

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## 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.*

Lisa J. Moyles, Reg. No. 40,737

Name of Person Signing

Signature

Date

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08/04/2004 HSETACHE 00000044 210550 10001441

01 FC:8021 40.00 BA

PATENT  
REEL: 015754 FRAME: 0239

Attorney's Docket No. 2775

**ASSIGNMENT OF INVENTION**

In consideration of the payment by ASSIGNEE to ASSIGNOR of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,

**ASSIGNOR:**

Joseph P. Orban, III

(If assignment is by person or entity to whom invention was previously assigned and this was recorded in PTO add the following)

Recorded on: \_\_\_\_\_  
Reel \_\_\_\_\_  
Frame \_\_\_\_\_

hereby sells, assigns and transfers to

**ASSIGNEE:**

Tyco Healthcare Group LP  
150 Glover Avenue  
Norwalk, CT 06856  
United States of America

and the successors, assigns and legal representatives of the ASSIGNEE the entire right, title and interest, including the right to sue for present, past and future infringement, in the United States, its territorial possessions, and in all foreign countries, including all treaty and convention rights in and to the invention and any and all improvements entitled:

**TITLE**

ENDOSCOPIC TISSUE REMOVAL APPARATUS AND METHOD

which is described in

- (a) ☐ U.S. patent application executed on even date herewith
- (b) ☐ U.S. patent application executed on \_\_\_\_\_
- (c) ☒ U.S. application serial no. 10/801,441 filed on 16 March 2004
- (d) ☐ U.S. patent no. \_\_\_\_\_ issued \_\_\_\_\_  
(also check (e) if foreign application(s) is also being assigned)
- (e) ☒ and any legal equivalent thereof in a foreign country, and, in and to, all United States and foreign Letters Patent, for the full term thereof, to be obtained for said invention by the above application or any provisional, continuation, division, renewal, extension or substitute thereof, and as to letters patent any re-issue or re-examination thereof;

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment;

Attorney's Docket No. 2775

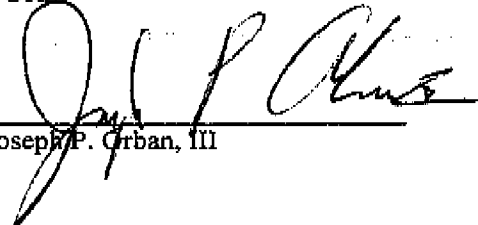
ASSIGNOR hereby authorizes and requests the Commissioner of Patents and Trademarks to issue all such Letters Patent to ASSIGNEE:

ASSIGNOR further covenants to promptly provide all pertinent facts and documents known and accessible to ASSIGNOR relating to said invention and said Letters Patent and legal equivalents; to testify as to the same in any interference, litigation or proceeding related thereto; to execute and deliver any and all papers that may be necessary or desirable to perfect the title to said invention or any Letters Patents which may be granted therefor in said ASSIGNEE, its successors, assigns or other legal representatives; to execute any provisional applications, continuations, additional or divisional applications for patents for said invention, or any part or parts thereof, and for the reissue of any Letters Patents to be granted therefor; and to make all rightful oaths and do all lawful acts requisite for procuring the same or for aiding therein, all without further compensation, but at the sole expense of ASSIGNEE, its successors, assigns, or other legal representatives.

ASSIGNOR hereby grants ASSIGNEE and Assignee's attorneys the power to insert the Serial No. and/or filing date of the above-described application(s) after such information becomes known to them.

IN WITNESS WHEREOF, I have hereunto set hand and seal.

INVENTORS:

  
Name: Joseph P. Urban, III

Dated: 7.19.04

State of Connecticut )

) ss

County of Fairfield )

Before me this 19<sup>th</sup> day of July 2004,  
personally appeared Joseph P. Urban, III to me personally known to be the person described in and who executed the above instrument, and acknowledged to me that he/she executed the same of his own free will for the purposes therein set forth.

  
Notary Public

AFFIX SEAL

**YOLANDA S. HERR**  
**NOTARY PUBLIC**  
MY COMMISSION EXPIRES 10/31/2008

**DOCKET NO. 2775  
(203-3094)**

**THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:      Joseph P. Orban, III

Serial No.:                  10/801,441                                  Examiner:                  Beverly M. Flanagan

Filed:                          03/16/2004                                  Art Unit:                  3739

For:                              **ENDOSCOPIC TISSUE REMOVAL APPARATUS AND METHOD**

Assignment Division  
Commissioner For Patents  
PO Box 1450  
Alexandria, VA 22313-1450  
Attn: Rhonda Nicol, Supervisor  
Fax: 703-308-9723

**RESPONSE TO NOTICE OF NON-RECORDATION OF DOCUMENT**

Sir:

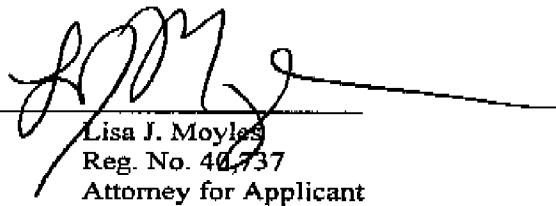
In response to the Notice Of Non-Recordation Of Document dated 02/02/2005, Applicants enclose herewith a copy of the Notice along with a copy of the new Recordation Cover Sheet reflecting the correct information to be recorded including the document ID number referenced on the Notice. Applicants also resubmit the properly executed Assignment of Invention (2 pages) and the original Recordation Cover sheet. Please charge the required fee of \$40.00 to cover the surcharge 37 CFR 3.41 to Deposit Account No. 21-0550.

In the event any event any extensions of time are required, please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

Dated: 2/22/05

By: \_\_\_\_\_

  
Lisa J. Moyles  
Reg. No. 40,737  
Attorney for Applicant

United States Surgical  
150 Glover Avenue  
Norwalk, CT 06856  
(203) 845-1480

ACCTS PAYABLE DEPT  
UNITED STATES PATENT AND TRADEMARK OFFICE2005 FEB 10 5 11 PM  
UNDER SECRETARY OF COMMERCE FOR INTELLECTUAL PROPERTY AND  
DIRECTOR OF THE UNITED STATES PATENT AND TRADEMARK OFFICE

FEB 11 2005

LEGAL DEPT. APPROVED  
U.S. SURGICAL CORPORATION

FEBRUARY 02, 2005

PTAS

U.S. SURGICAL, A DIVISION OF TYCO  
HEALTHCARE GROUP LP  
LISA J. MOYLES  
150 GLOVER AVENUE  
NORWALK, CT 06856

\*102806637A\*

2775 U.S. A

*Corrected Assignment Due: March 2, 2005*UNITED STATES PATENT AND TRADEMARK OFFICE  
NOTICE OF NON-RECORDATION OF DOCUMENT

DOCUMENT ID NO.: 102806637

THE ENCLOSED DOCUMENT HAS BEEN EXAMINED AND FOUND NON-RECORDABLE BY THE ASSIGNMENT DIVISION OF THE U.S. PATENT AND TRADEMARK OFFICE. THE REASON(S) FOR NON-RECORDATION ARE STATED BELOW. DOCUMENTS BEING RESUBMITTED FOR RECORDATION MUST BE ACCOMPANIED BY A NEW COVER SHEET REFLECTING THE CORRECT INFORMATION TO BE RECORDED AND THE DOCUMENT ID NUMBER REFERENCED ABOVE.

THE ORIGINAL DATE OF FILING OF THIS ASSIGNMENT DOCUMENT WILL BE MAINTAINED IF RESUBMITTED WITH THE APPROPRIATE CORRECTION(S) WITHIN 30 DAYS FROM THE DATE OF THIS NOTICE AS OUTLINED UNDER 37 CFR 3.51. THE RESUBMITTED DOCUMENT MUST INCLUDE A STAMP WITH THE OFFICIAL DATE OF RECEIPT UNDER 37 CFR 3. APPLICANTS MAY USE THE CERTIFIED PROCEDURES UNDER 37 CFR 1.8 OR 1.10 FOR RESUBMISSION OF THE RETURNED PAPERS, IF THEY DESIRE TO HAVE THE BENEFIT OF THE DATE OF DEPOSIT IN THE UNITED STATES POSTAL SERVICE.

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1. THE SERIAL NUMBER MUST BE ON THE COVER SHEET. RE-SUBMIT ALL PAPERS INCLUDING THIS NON-RECORD NOTICE THROUGH PTAS FAX @ 703 306-5995.

RHONDA NICOL, SUPERVISOR  
ASSIGNMENT DIVISION  
OFFICE OF PUBLIC RECORDS

PATENT

Atty. Docket No: 2775

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Joseph P. Orban, III

SERIAL NO.: 10/801,441

FILED: March 26, 2004

FOR: ENDOSCOPIC TISSUE REMOVAL APPARATUS AND METHOD

Rhonda Nicol, Supervisor  
Assignment Division  
Office of Public Records  
Fax: 703-306-5995

CERTIFICATE OF FACSIMILE

Date of Transmission: February 22, 2005


I hereby certify that the following:

- [x] This Certificate of Facsimile
- [x] Copy of Notice of Non-Recordation of Document (1 pg)
- [x] Response to Notice of Non-Recordation of Document (2 pgs)
- [x] Recordation Cover Sheet dated 2/22/05

Resubmitting:

- [x] Recordation Cover Sheet dated 7/29/04 (1 pg)
- [x] Assignment of Invention (2pgs)

are being transmitted via facsimile to the U.S. Patent & Trademark Office, Office of Licensing and Review, at fax number 703-305-6384 on the Date of Transmission indicated above. The total number of pages being transmitted is 8.

  
\_\_\_\_\_  
Susan S. Rickard

United States Surgical, a division of  
TYCO HEALTHCARE GROUP LP  
150 Glover Avenue  
Norwalk, CT 06856  
Tel: (203) 845-4489  
Fax: (203) 845-4266