

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:

NEW ASSIGNMENT

NATURE OF CONVEYANCE:

Release of Security Interest

CONVEYING PARTY DATA

Name	Execution Date
Silicon Valley Bank d/b/a Silicon Valley East	11/02/2004

RECEIVING PARTY DATA

Name:	AngioLink Corporation
Street Address:	125 John Hancock Road
Internal Address:	Suite 6
City:	Taunton
State/Country:	MASSACHUSETTS
Postal Code:	02780

PROPERTY NUMBERS Total: 6

Property Type	Number
Patent Number:	6322580
Patent Number:	6506210
Patent Number:	6348064
Patent Number:	6533762
Patent Number:	6767356
Application Number:	10036690

CORRESPONDENCE DATA

Fax Number: (612)492-7077

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: 612-492-7266

Email: msennes@fredlaw.com

Correspondent Name: Mary G. Sennes

Address Line 1: 200 South Sixth Street

Address Line 2: Suite 4000

Address Line 4: Minneapolis, MINNESOTA 55402

PATENT

REEL: 015918 FRAME: 0223

500028109

OP \$240.00 6322580

NAME OF SUBMITTER:

Mary G. Sennes

Total Attachments: 5

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October 29, 2004

AngioLink Corporation
125 John Hancock Road, Suite 6
Taunton, Massachusetts 02780

Medtronic, Inc.
710 Medtronic Parkway
Minneapolis, Minnesota 55432-5604

Re: AngioLink Corporation

Ladies and Gentlemen:

AngioLink Corporation, a Delaware corporation (the "Borrower"), has requested that we accept from Borrower or its designee payment in full of all indebtedness and liabilities of Borrower owing to us as of October 29, 2004 (the "Payoff Date") pursuant to the agreements listed on Exhibit A attached hereto (collectively, the "Agreements").

We hereby agree to do so, provided Borrower or its designee sends the Payoff Amount (as defined below) via wire transfer. Upon our receipt of such Payoff Amount, all of our financing arrangements with and security interests in the assets of Borrower, as well as each of the Agreements, shall be paid and resolved in full and shall automatically terminate. The indebtedness and liabilities of the Borrower to us as of the Payoff Date is \$ 779,562.78 (as increased pursuant to the next sentence, the "Payoff Amount"). The Payoff Amount will increase by \$ 91.60 per day for any number of days after the Payoff Date on which the Payoff Amount is received by us. The Payoff Amount should be wired to us as follows:

Name: Angiolink Corporation
Bank: Silicon Valley Bank
ABA No.: 121140399
Bank Acct. No.: Individual loan #5 (see attached.)
Reference: Loan payoff
Attention: John Ross

Upon receipt by the undersigned of the Payoff Amount in accordance with the instructions set forth above, and in consideration thereof, the undersigned (a) hereby authorizes Borrower or Medtronic, Inc. ("Medtronic") or their respective agents to terminate any and all security interests, liens, mortgages and other encumbrances that the undersigned has or may have against any of the assets of Borrower, including, but not limited to, the security interests

evidenced by Uniform Commercial Code financing statements, mortgages and intellectual property filings, and (b) will terminate any other lien or control it has on any assets of Borrower and will forward, at the direction of Borrower, such documentation necessary to evidence of such termination, in form sufficient for filing and recording with all applicable filing and recording offices, to Medtronic via facsimile and regular mail at the address listed below:

Medtronic, Inc.
710 Medtronic Parkway
Minneapolis, Minnesota 55432-5604
Attention: Chad Cornell
Fax: (763) 514-4879

and to us via facsimile and regular mail at the address listed below:

Silicon Valley Bank
One Newton Executive Park, Suite 200
2221 Washington Street
Newton, Massachusetts 02462
Attention: Douglas Marshall
Fax: (617) 969-4395

This letter agreement may be executed in any number of counterparts and by different parties on separate counterparts, each of which, when executed and delivered, shall be deemed to be an original, and all of which, when taken together, shall constitute but one and the same agreement. Delivery of any executed counterpart of this letter agreement by telefacsimile shall be equally as effective as delivery of an original executed counterpart of this letter agreement. Any party delivering an executed counterpart of this letter agreement by telefacsimile also shall deliver an original executed counterpart of this letter agreement but the failure to deliver an original executed counterpart shall not affect the validity, enforceability, and binding effect of this letter agreement.

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11- 1-04;11:19AM;AngioLink Corp.
OCT-29-2004 FRI 02:38 PM SILICON VALLEY BANK - PA

FAX NO. 16179694395

508 880 0766

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P. 01

Silicon Valley Bank

By: _____

Name: _____

Title: _____

**Silicon Valley Bank (doing business as
"Silicon Valley East")**

By: Doug M

Name: Douglas Marshall

Title: Vice President

APPROVED AND AGREED TO:

AngioLink Corporation

By: _____

Name: James Lousararian

Title: President and Chief Executive Officer

BOSTON 2319052v1

Silicon Valley Bank

By: _____

Name: _____

Title: _____

**Silicon Valley Bank (doing business as
"Silicon Valley East")**

By: _____

Name: _____

Title: _____

APPROVED AND AGREED TO:

AngioLink Corporation

By: _____

Name: James Lousararian

Title: President and Chief Executive Officer

BOSTON 2319052v1

11- 1-04: 5:38PM;Angiolink Corp.
NOV-01-04 MON 05:00 PM
NOV-01-2004 MON 01:41 PM DOCUMENTATION SVB
NOV-01-04 MON 04:48 PM

FHA NO. :508 880 0786 # 3/ 3
FAX NO. 408 498 2429 P. 03
FAX NO. P. 07

Silicon Valley Bank

By: Maggie Garcia
Name: Maggie Garcia
Title: Loan Services Manager

Silicon Valley Bank (doing business as
"Silicon Valley Bank")

By: Douglas Marshall
Name: Douglas Marshall
Title: Vice President

APPROVED AND AGREED TO:

Angiolink Corporation

By: _____
Name: James L. Lounsbury
Title: President and Chief Executive Officer

NOV-01-04 MON 05:00 PM