Form **PTO-1595** (Rev. 09/04) OMB No. 0651-002X (exp. 6

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## 102918826 **RECORDATION FORM (**

| PATEN   |   |
|---|---|
| To the Director of the U.S. Patent and Trademark Office: Plea   | ase record the attached documents or the new address(es) below  |
| 1. Name of conveying party(ies)/Execution Date(s):  |   |
| Richard J. Kloecker   | Name: Innovative Medical Corporation  |
|   | Internal Address:   |
| Execution Date(s) November 5, 2003  Additional name(s) of conveying party(ies) attached? Yes V  | Street Address: #8 Outer Ladue Drive  |
| 3. Nature of conveyance:  |   |
| Assignment Merger   | City: St. Louis   |
| Security Agreement Change of Name   | State: Missouri   |
| Government Interest Assignment  | Country: United States Zip: 63131   |
| Executive Order 9424, Confirmatory License  |   |
| Other  4. Application or patent number(s): This   | Additional name(s) & address(es) attached? Yes  |
|   |   |
| 5. Name and address to whom correspondence  | attached? Yes No  6. Total number of applications and patents   |
| 5. Name and address to whom correspondence concerning document should be mailed:  | 6. Total number of applications and patents involved:   |
| 5. Name and address to whom correspondence concerning document should be mailed:  Name: Paul M. Denk  | 6. Total number of applications and patents involved:  1  7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00   |
| 5. Name and address to whom correspondence concerning document should be mailed:  | 6. Total number of applications and patents involved:  7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00  Authorized to be charged by credit card   |
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| 5. Name and address to whom correspondence concerning document should be mailed:  Name: Paul M. Denk  | 6. Total number of applications and patents involved:  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  |
| 5. Name and address to whom correspondence concerning document should be mailed:  Name: Paul M. Denk  Internal Address:  Street Address: 763 S. New Ballas Road, Suite  | 6. Total number of applications and patents involved:  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  |
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| 5. Name and address to whom correspondence concerning document should be mailed:  Name: Paul M. Denk  Internal Address:  Street Address: 763 S. New Ballas Road, Suite  City: St. Louis   | 6. Total number of applications and patents involved:  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)  8. Payment Information  a. Credit Card Last 4 Numbers Expiration Date                                  |
| 5. Name and address to whom correspondence concerning document should be mailed:  Name: Paul M. Denk  Internal Address:  Street Address: 763 S. New Ballas Road, Suite  City: St. Louis  State: Missouri Zip: 63141   | 6. Total number of applications and patents involved:  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)  8. Payment Information a. Credit Card Last 4 Numbers Expiration Date  b. Deposit Account Number 040731 |
| 5. Name and address to whom correspondence concerning document should be mailed:  Name: Paul M. Denk  Internal Address:  Street Address: 763 S. New Ballas Road, Suite  City: St. Louis  State: Missouri Zip: 63141  Phone Number: 314-872-8136   | 6. Total number of applications and patents involved:  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)  8. Payment Information  a. Credit Card Last 4 Numbers Expiration Date                                  |
| 5. Name and address to whom correspondence concerning document should be mailed:  Name: Paul M. Denk  Internal Address:  Street Address: 763 S. New Ballas Road, Suite  City: St. Louis  State: Missouri Zip: 63141  Phone Number: 314-872-8136  Fax Number: 314-447-0390   | 6. Total number of applications and patents involved:  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)  8. Payment Information a. Credit Card Last 4 Numbers Expiration Date  b. Deposit Account Number 040731 |
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## **ASSIGNMENT**

WHEREAS, I, the undersigned, RICHARD J. KLOECKER, a citizen of the United States and residing in the City of St. Louis, State of Missouri, am an officer and employee of INNOVATIVE MEDICAL CORPORATION, a Missouri corporation, having a place of business located at #8 Outer Ladue Drive, St. Louis, Missouri 63131, and I understand and acknowledge that I enjoy such employment, in part, because of my potential capacity to invent, and that one of my duties as such an employee is to endeavor to make invention and improvements upon the same for the benefit of my employer, and that a condition of said employment is that all patent rights appertaining to any invention by me, in the course of my employment, to be assigned by me unto the said INNOVATIVE MEDICAL CORPORATION, without any additional charge whatsoever in addition to my salary;

AND WHEREAS, in the course of said employment, I, the undersigned,
RICHARD J. KLOECKER, am the inventor having invented certain improvements in
COMPRESSION GARMENT FOR SELECTIVE APPLICATION FOR
TREATMENT OF LYMPHEDEMA AND RELATED ILLNESS MANIFESTED
AT VARIOUS LOCATIONS OF THE BODY

for which application was made to obtain letters patent of the United States.

NOW, THEREFORE, know all men by these presents that in compliance with the duties and obligations inherent in my aforesaid agreement, and in further consideration of a bonus of One Dollar (\$1.00), and other valuable consideration including shares of stock in said corporation, in hand paid by INNOVATIVE MEDICAL CORPORATION, (receipt whereof by me is hereby acknowledged) I, said RICHARD J. KLOECKER, do hereby formally assign, transfer, and set over unto said INNOVATIVE MEDICAL CORPORATION, a corporation, its successors and assigns, all right, title, and interest in and to the aforesaid invention and patent application upon, COMPRESSION GARMENT FOR SELECTIVE APPLICATION FOR TREATMENT OF LYMPHEDEMA AND RELATED ILLNESS MANIFESTED AT VARIOUS LOCATIONS OF THE BODY, as

PATENT REEL: 016138 FRAME: 0422 fully and entirely as the same would have been held and enjoyed by me if this assignment and sale had not been made; and I agree to execute such further applications, powers of attorney, assignments and other documents as may be necessary or desirable to fully effectuate this agreement.

AND, I further grant to INNOVATIVE MEDICAL CORPORATION, its successors and assigns, the right to claim for any application for said invention the full benefit of any international agreement between the United States and any foreign country or countries, and to file for patents in any foreign country.

AND I DO HEREBY authorize and request the Commissioner of Patents and Trademarks to issue the said Letters Patent, when granted, to the said INNOVATIVE MEDICAL CORPORATION, its successors and assigns, as assignee of the entire right, title, and interest in and to the said invention, for the sole use and behoof of said INNOVATIVE MEDICAL CORPORATION, a Missouri corporation, for its successors and assigns, to the full ends of the terms for which Letters Patent may be granted.

The Serial Number and filing date for the patent application contained in this assignment is as follows:

| Serial No.: | 10/208,164           | Filed:  | 07/29/2002    |                   |
|-------------|----------------------|---------|---------------|-------------------|
| EXECUTED    | and delivered this _ | day of  | W. regularity | _ <b>,</b> 2003 · |
|             |                      | RICHARD | I KI OECKER   | 2.41              |

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| STATE OF MISSOURI ')  |
|---|
| COUNTY OF States ) SS:  |
| On this day of, 2003, before me, a Notary   |
| Public, personally appeared RICHARD J. KLOECKER, to me known to be the person   |
| named in and who executed the above assignment, and acknowledged to me that he  |
| executed the same for the uses and purposes therein mentioned, as his own free act and  |
| LINDSAY M. SCHENATO  Notary Public - Notary Seal  [SEAL] STATE OF MISSOURI  Jefferson County  My Commission Expires: July 30, 2007  Notary Public |
| My Commission Expires:  |

D.N. 7333

**RECORDED: 01/06/2005**