

Form PTO-1595

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(Rev. 10/02)

OMB No. 0651-0027 (exp. 6/30/2005)

Patent and Trademark Office

1. Name of conveying party(ies):

Massachusetts Institute of Technology

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

2. Name and address of receiving party(ies)

Name: Massachusetts Eye and Ear Infirmary

Internal Address: _____

Street Address: 243 Charles StreetBoston, MassachusettsAdditional name(s) & address(es) attached? Yes ___ No ☒

3. Nature of conveyance:

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

Execution Date: May 5, 2005

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the applications is:

A. Patent Application No.(s)

B. Patent No.(s) 5,575,813Additional numbers attached? Yes ___ No ☒

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

Name: Patent GroupInternal Address: Choate, Hall & Stewart LLPStreet Address: Exchange Place, 53 State StreetCity: Boston State: MA ZIP: 02109-2804

6. Total number of applications and patents involved: 1

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

☐ Enclosed☒ Authorized to be charged to deposit account8. Deposit account number: 031721

(Attached duplicate copy of this page if paying by 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.

Elijah E. Cocks, 47,499

Name of Person Signing

Elijah E. Cocks

Signature

May 13, 2005

Date

Total number of pages including cover sheet, attachments, and document: 2

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 Director of the U.S. Patent & Trademark Office, Mail Stop Assignment Recordation Services
 P.O. Box 1450, Alexandria, VA 22313-1450

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ASSIGNMENT


WHEREAS, MASSACHUSETTS INSTITUTE OF TECHNOLOGY, a non-profit educational institute having offices at 77 Massachusetts Avenue, Cambridge, Massachusetts, is the owner of record of U.S. Patent No. 5,575,813, issued November 19, 1996, entitled "Low Pressure Neural Contact Structure" (hereinafter the "Patent"); and

WHEREAS, MASSACHUSETTS EYE AND EAR INFIRMARY, a Massachusetts organization having offices at 243 Charles Street, Boston, Massachusetts, is desirous of acquiring an interest in and to the Patent;

NOW THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, MASSACHUSETTS INSTITUTE OF TECHNOLOGY does hereby assign to MASSACHUSETTS EYE AND EAR INFIRMARY, and its successors and assigns, an undivided part interest in the Patent and any inventions disclosed therein, including all divisional, continuing, substitute, renewal, reissue and all other applications for patent which have been or shall be filed in the United States and all foreign countries on any of said inventions and any Letters Patents or other official patent grants that may derive therefrom.

IN WITNESS WHEREOF, I hereto set my hand and seal this 29 day of

April 2005


Name: KARIN K. RIVARD
Title: ASSISTANT DIRECTOR AND COUNSEL
TECHNOLOGY LICENSING OFFICE
MASSACHUSETTS INSTITUTE OF TECHNOLOGY

STATE OF Massachusetts
COUNTY OF Middlesex SS.

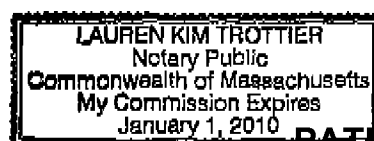
On this 5th day of May, 2005, before me, the undersigned notary public, personally appeared Karin Rivard, personally known to me or proved to me through satisfactory evidence of identification, which consisted of _____, to be the person whose name is signed on the preceding document, and acknowledged to me that he/she signed it voluntarily for its stated purpose as a representative of the MASSACHUSETTS INSTITUTE OF TECHNOLOGY duly authorized to act on its behalf in this matter.

NOTARY PUBLIC



[Notary's Seal Here]

My Commission Expires:



PATENT