

FORM PTO-1595 (Rev. 03/05)
(exp. 6/30/05)

RECORDATION FORM COVER SHEET

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

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

- 1) OREST W. BLASCHUK
- 2) BARBARA J. GOUR
- 3) JAMES MATTHEW SYMONDS
- 4) STEPHEN BYERS

Execution Dates:

- 1) FEBRUARY 21, 2005
- 2) FEBRUARY 14, 2005
- 3) MAY 5, 2005
- 4) FEBRUARY 15, 2005
- 5) _____
- 6) _____

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

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

Name: ADHEREX TECHNOLOGIES, INC.Internal Address: C/O LABARGE WEINSTEIN LLPStreet Address: 515 LEGGET DRIVE, SUITE 800City: OTTAWAState: ONTARIOCountry: CANADA Zip K2K 3G4Additional names & addresses attached? ☐ Yes ☒ No

3. Nature of conveyance:

- ☒ Assignment ☐ Merger
- ☐ Security Agreement ☐ Change of Name
- ☐ Joint Research Agreement
- ☐ 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).
11/003,150

B. Patent No(s).

Additional numbers attached? ☐ Yes ☒ No

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

Name: Seed Intellectual Property Law Group PLLCInternal Address: JEFFREY HUNDLEY, PH.D.,
PATENT AGENTStreet Address: 701 Fifth Avenue, Suite 6300City: SeattleState: WA ZIP: 98104-7092Phone Number: 206-622-4900Fax Number: 206-682-6031Email Address: jeffh@SeedIP.com

6. Total number of applications and patents involved

1

7. Total Fee (37 CFR 1.21(h) & 3.41):

\$40

- ☐ Authorized to be charged by credit card.
- ☒ 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 19-1090
Authorized User Name Jeff Hundley, Ph.D.

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.

JEFFREY HUNDLEY, PH.D., PATENT AGENT

Name of Person Signing

Signature

JUNE 13, 2005

Date

Total number of pages including cover sheet, attachments, and document: 6Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

ASSIGNMENT

WHEREAS, we, Orest W. Blaschuk, Barbara J. Gour, James Matthew Symonds, and Stephen Byers (hereinafter referred to as ASSIGNORS), having mailing addresses of 4998 de Maisonneuve West, Suite 1520, Westmount, Quebec, CANADA H3Z 1N2; 2890 Donnelly Drive, RR#4, Kemptville, Ontario, CANADA K0G 1J0; 232 Morcroft Lane, Durham, North Carolina 27705 and 1723 Webster Street Northwest, Washington D. C. 20011, respectively, are the joint inventors of an invention entitled "COMPOUNDS AND METHODS FOR MODULATING OB-CADHERIN-MEDIATED FUNCTION," as described and claimed in the specification for which an application for United States letters patent was filed on December 3, 2004 and assigned Application No. 11/003,150;

WHEREAS, Adherex Technologies, Inc. (hereinafter referred to as ASSIGNEE), a corporation of Canada having a place of business c/o LaBarge Weinstein LLP, 515 Legget Drive, Suite 800, Ottawa, Ontario, Canada K2K 3G4, is desirous of acquiring the entire right, title and interest in and to the invention and in and to any letters patent that may be granted therefor in the United States and in any and all foreign countries;

NOW, THEREFORE, in exchange for good and valuable consideration, the receipt of which is hereby acknowledged, ASSIGNORS hereby sell, assign and transfer unto said ASSIGNEE the entire right, title and interest in and to said invention, said application and any and all letters patent which may be granted for said invention in the United States of America and its territorial possessions and in any and all foreign countries, and in any and all divisions, reissues and continuations thereof, including the right to file foreign applications directly in the name of ASSIGNEE and to claim priority rights deriving from said United States application to which said foreign applications are entitled by virtue of international convention, treaty or otherwise, said invention, application and all letters patent on said invention to be held and enjoyed by ASSIGNEE and its successors and assigns as fully and entirely as the same would have been held and enjoyed by ASSIGNORS had this assignment, transfer and sale not been made. ASSIGNORS hereby authorize and request the Commissioner of Patents and Trademarks to issue all letters patent on said invention to ASSIGNEE. ASSIGNORS agree to execute all instruments and documents required for the making and prosecution of applications for United

Application No. 11/003,150

States and foreign letters patent on said invention, for litigation regarding letters patent, or for the purpose of protecting title to said invention or letters patent therefor.

February 21, 2005 Orest W. Blaschuk
Date Orest W. Blaschuk

Province of Quebec)
Country of CANADA) ss.

I certify that I know or have satisfactory evidence that Orest W. Blaschuk is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated February 21, 2005
Signature of Notary Public [Signature]
Printed Name SILVANO BIEBRIER
My appointment expires life

Application No. 11/003,150

Feb-14/05
Date

Barbara J. Gour
Barbara J. Gour

Province of Ontario)
Country of Canada)

ss.

I certify that I know or have satisfactory evidence that Barbara J. Gour is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated Feb-14/05
Signature of [Signature]
Notary Public
Printed Name WILLIAM A. ADAMS
My appointment expires _____

Date
State of _____)
County of _____)

James Matthew Symonds
ss.

I certify that I know or have satisfactory evidence that James Matthew Symonds is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated _____
Signature of _____
Notary Public
Printed Name _____
My appointment expires _____

Application No. 11/003,150

Date _____ Barbara J. Gour
Province of Ontario)
Country of Canada) ss.

I certify that I know or have satisfactory evidence that Barbara J. Gour is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated _____
Signature of _____
Notary Public _____
Printed Name _____
My appointment expires _____

MAY 5, 2005 _____
Date _____ James Matthew Symonds
State of NORTH CAROLINA)
County of DURHAM) ss.

I certify that I know or have satisfactory evidence that James Matthew Symonds is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated _____
Signature of _____
Notary Public _____
Printed Name _____
My appointment expires _____

Application No. 11/004,107

February 15th 2005

02/15/05

Date

Stephen W. Byers
Stephen ByersState of DC)

County of _____)

ss.

I certify that I know or have satisfactory evidence that Stephen Byers is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated

02/15/05

Signature of

Notary Public

Witness

Printed Name

My appointment expires _____

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(JEH:tt)