DOCKET NO.: B0801.70300US01

RECORDATION FORM COVER SHEET **PATENTS ONLY**

FORM PTO-1595 U.S.

DEPARTMENT OF COMMERCE

(Rev. 6-93) OMB No. 0651-0011 (exp. 4/94)	Patent and Trademark Office			
To the Commissioner for Patents : Please reco	d the attached original documents or copy thereof.			
1. Name of conveying party(ies): Lisa Cavacini Marshall R. Posner Additional name(s) of conveying party(ies) attached? [] Yes [X] No 3. Nature of conveyance: [X] Assignment [] Merger [] Security Agreement [] Change of Name [] Other	2. Name and address of receiving party(ies) Name: Beth Israel Deaconess Medical Center, Inc. Internal Address: Street Address: 330 Brookline Avenue Boston, MA 02215			
Execution Date: 05/20/2005 and 07/12/2005 Additional name(s) & addresses(es) attached? [] Yes [X] N				
 4. Application number(s) or patent number(s): 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) 11/111,688 				
Additional numbers attached? [] Yes [X] No				
5. Name and address of party to whom correspondence Concerning document should be mailed: Name: Maria A. Trevisan Address: Wolf, Greenfield & Sacks, P.C. 600 Atlantic Avenue Boston, MA 02210-2206	6. Total number of applications and patents involved; [1] 7. Total fee (37 CFR 3.41) \$ 40.00 [] Enclosed [X] Authorized to be charged to deposit account			
	The Commissioner is authorized to charge any deficiencies in the enclosed payment to: 8. Deposit Account No: 23/2825			
DO NOT US	E THIS SPACE			
9. Statement and signature	nation is true and correct and any attached copy is a true copy of			
Maria A. Trevisan	July 18, 2005			
Name of Person Signing Signat	Ture Date			
Total number of pages including cover	r sheet, attachments, and document: [7]			

Mall documents to be recorded with required cover sheet information to (modify as appropriate):

Mail Stop Assignment Recordation Services Director - U.S. Patent and Trademark Office PO Box 1450, Alexandría, VA 22313-1450

<u>ASSIGNMENT</u>

For good and valuable consideration, the receipt of which is hereby acknowledged, we the undersigned, Lisa Cavacini and Marshall R. Posner hereby:

Sell, assign and transfer to Beth Israel Deaconess Medical Center, Inc., a Massachusetts corporation having a place of business at 330 Brookline Avenue, Boston, MA 02215, its successors, assigns and legal representatives, all hereinafter referred to as the Assignee, our entire right, title and interest for the United States and all foreign countries, in and to any and all inventions and designs which are disclosed in the patent application for United States Letters Patent filed in the United States Patent and Trademark Office on April 21, 2005, under Serial No. 11/111,688, bearing Docket No. B0801.70300US01, and titled POLY-N-ACETYL GLUCOSAMINE (PNAG/dPNAG)-BINDING PEPTIDES AND METHODS OF USE THEREOF, and in and to said application and all non-provisional, divisional, continuing, substitute, renewal, reissue and all other applications for Letters Patent, utility models, industrial designs or similar intellectual property rights which have been or shall be filed in the United States, internationally, and in any foreign country on any of said inventions; and in and to all original and reissued patents which have been or shall be issued in the United States or any other jurisdiction on said inventions, including the right to apply for patent rights in each foreign country and all rights to priority;

Agree that said Assignee may apply for and receive Letters Patent and utility model and industrial design registrations for said inventions in its own name; and when requested, without charge to but at the expense of said Assignee, we agree to carry out in good faith the intent and purpose of this assignment, by executing all non-provisional, divisional, continuing, substitute, renewal, reissue, and all other patent, utility model and industrial design applications on any and all said inventions, by executing all rightful oaths, assignments, powers of attorney and other papers, by communicating to said Assignee all facts known to us relating to said inventions and the history thereof, and generally by doing everything reasonably possible which said Assignee shall consider desirable for aiding in securing and maintaining proper protection for said inventions and for vesting title to said inventions and all applications for patents and all patents on said inventions, in said Assignee;

Request the Honorable Director of Patents and Trademarks to issue said Letters Patent to said Assignee;

Authorize and request Wolf, Greenfield & Sacks, P.C. to supply any missing patent/application identification information or correct any errors in the patent/application identification information provided above, whether discovered prior to or after recordation; and

Covenant with said Assignee that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been made to others by us and that full right to convey the same as herein expressed is possessed by us.

PATENT REEL: 016543 FRAME: 0170 Assignment

Docket No.: B0801.70300US01

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Inventor: Lisa Cavacini Address: 5 Perry Road Natick, MA 01760 Citizenship: United States MASSACHUSETES: STATE/COMMONWEALTH OF COUNTY OF SUFFOLK: On this 20th day of MAY appeared LISA CAVALINI 20 05, before me, the undersigned notary public, personally , proved to me through satisfactory evidence of identification, which were hospital identification, which were nose; +a/ ID'S , to be the person who signed the preceding or attached document in my presence and swore or affirmed to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge and belief, and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose. SEA

My commission expires:

THARA L, WALK
Notary Public
Primogwaalth of Massachusetts
My Commission Expires
Fobruary 9, 2007

Page 3 of 3

Assignment		
Date	 Inventor: Address:	Marshall R. Posner 6 Birch Road Medfield, MA 02052
	Citizenship:	United States
STATE/COMMONWEALTH OF		;
COUNTY OF	;	
On this day of appeared identification, which were	, 20, befo , proved t	ore me, the undersigned notary public, personally to me through satisfactory evidence of to be the person who signed the
preceding or attached document in my are truthful and accurate to the best of (she) signed it voluntarily for its stated	(his) (her) knowledg	, to be the person who signed the or affirmed to me that the contents of the document e and belief, and acknowledged to me that (he)
SEAL		
		Notary Public My commission expires:

ASSIGNMENT

For good and valuable consideration, the receipt of which is hereby acknowledged, we the undersigned, Lisa Cavacini and Marshall R. Posner hereby:

Sell, assign and transfer to **Beth Israel Deaconess Medical Center**, Inc., a **Massachusetts** corporation having a place of business at **330 Brookline Avenue**, **Boston**, **MA 02215**, its successors, assigns and legal representatives, all hereinafter referred to as the Assignee, our entire right, title and interest for the United States and all foreign countries, in and to any and all inventions and designs which are disclosed in the patent application for United States Letters Patent filed in the United States Patent and Trademark Office on **April 21, 2005**, under Serial No. **11/111,688**, bearing Docket No. **B0801.70300US01**, and titled POLY-N-ACETYL GLUCOSAMINE (PNAG/dPNAG)-BINDING PEPTIDES AND METHODS OF USE THEREOF, and in and to said application and all non-provisional, divisional, continuing, substitute, renewal, reissue and all other applications for Letters Patent, utility models, industrial designs or similar intellectual property rights which have been or shall be filed in the United States, internationally, and in any foreign country on any of said inventions; and in and to all original and reissued patents which have been or shall be issued in the United States or any other jurisdiction on said inventions, including the right to apply for patent rights in each foreign country and all rights to priority;

Agree that said Assignee may apply for and receive Letters Patent and utility model and industrial design registrations for said inventions in its own name; and when requested, without charge to but at the expense of said Assignee, we agree to carry out in good faith the intent and purpose of this assignment, by executing all non-provisional, divisional, continuing, substitute, renewal, reissue, and all other patent, utility model and industrial design applications on any and all said inventions, by executing all rightful oaths, assignments, powers of attorney and other papers, by communicating to said Assignee all facts known to us relating to said inventions and the history thereof, and generally by doing everything reasonably possible which said Assignee shall consider desirable for aiding in securing and maintaining proper protection for said inventions and for vesting title to said inventions and all applications for patents and all patents on said inventions, in said Assignee;

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Covenant with said Assignee that no assignment, grant, mortgage, license or other agreement affecting the rights and property herein conveyed has been made to others by us and that full right to convey the same as herein expressed is possessed by us.

PATENT REEL: 016543 FRAME: 0173

ate	· ·	Lisa Cavacini 5 Perry Road Natick, MA 01760
	Citizenship:	United States
TATE/COMMONWEALTH OF _		:
OUNTY OF	_;	
opeared		ore me, the undersigned notary public, personally to me through satisfactory evidence of, to be the person who signed the
eceding or attached document in my pr	esence and swore is) (her) knowledg	or affirmed to me that the contents of the document se and belief, and acknowledged to me that (he)
SEAL		
		Notary Public My commission expires:

Assignment

Page 3 of 3

Date

Inventor:

Marshall R. Posner

Address:

6 Birch Road

Medfield, MA 02052

Citizenship:

United States

20 8, before me, the undersigned notary public, personally

appeared MARShAll proved to me through satisfactory evidence of

_, to be the person who signed the identification, which were MASS LICENSE preceding or attached document in my presence and swore or affirmed to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge and belief, and acknowledged to me that (he)

(she) signed it voluntarily for its stated purpose.

SEAL

RECORDED: 07/18/2005

My commission expires: