AID 581-40 Form PTO-1595 (Rev. 07/05) U.S. DEPARTMENT OF COMMERCE OMB No. 0651-0027 (exp. 6/30/2008) United States Patent and Trademark Office 02-21-2006 103180784 To the Director of the U.S. Patent . hed documents or the new address(es) below. 1. Name of conveying party(ies) 2. Name and address of receiving party(ies) Luca Garabet Name: GerroMed Pflege und Medizintechnik GmbH & Co. Kg Internal Address: Additional name(s) of conveying party(ies) attached? Yes 🗹 No 3. Nature of conveyance/Execution Date(s): Street Address: Fangdieckstrasse 75b Execution Date(s) 25 July 2005 ✓ Assignment Merger City: Hamburg Security Agreement J Change of Name \_\_\_ Joint Research Agreement Government Interest Assignment Country: Germany Zip:22547 Executive Order 9424, Confirmatory License Other Additional name(s) & address(es) attached? Yes Vo 4. Application or patent number(s): This document is being filed together with a new application. A. Patent Application No.(s) B. Patent No.(s) 08/15/2005 HKAYPAGH 00000060 10544439 06 FOE 8021 40.00 DP Additional numbers attached? Yes No. 5. Name and address to whom correspondence 6. Total number of applications and patents concerning document should be mailed: involved: 1 Name: Scott W. Kelley 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00 Internal Address: Suite 1650 Authorized to be charged by credit card Authorized to be charged to deposit account ✓ Enclosed Street Address: 6320 Canoga Avenue None required (government interest not affecting title) 8. Payment Information City: Woodland Hills a. Credit Card Last 4 Numbers \_\_\_\_\_ State: California Zip: 91367 Expiration Date

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|---|-----------------|--|-----------------------------|--------------------------|--|
|   |                 |  | Docket Number (O            | Docket Number (Optional) |  |
| ·····   | ASSIGNMENT OF   | APPLICATION                                      | RICHT-47829                 |                          |  |
| Whereas, I/We,  | Luca Garabet    | of Hambu   | rg, Germany                 | , hereafter              |  |
| referred to as applicant, have invented certain new and useful improvements in MULTI-LAYER COMBINATION OF AN ELECTRIC STIMULATION ELECTRODE AND A WOUND DRESSING                                      |                 |  |                             |                          |  |
| for which an application for a United States Patent was filed on  |                 |  |                             |                          |  |
| Application   | Number          | •  |                             |                          |  |
| Gerr  | oMed Filege und | d States Patent was executed Co. Kg Hamburg, Ger |                             |                          |  |
| to "assignee" whose malling address is Fengdieckstrasse 75b, 22547 Hamburg, Germany is  |                 |  |                             |                          |  |
| destrous of acquiring the entire right, title and interest in the same;   |                 |  |                             |                          |  |
| Now, therefore, in consideration of the sum of  |                 |  |                             |                          |  |
| Executed this _   | 25th            | _day of  | uly 20 <u>05</u>            | <del></del> -            |  |
| at Hamburg, Germany   |                 |  |                             |                          |  |
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| State of  | )               |  | Carabet                     |                          |  |
| County of   | SS:             | Printed N  | lame/Registration No., if a | pplicable                |  |
| Before me personally appeared said  |                 |  |                             |                          |  |
| and acknowledged the foregoing instrument to be his free act and deed this  |                 |  |                             |                          |  |
| day of  | 20              |  |                             |                          |  |
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| Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below. |                 |  |                             |                          |  |
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