

04-21-2006

FORM PTO-1595

REC

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE

To the Honorable Director of Patents and Trademarks

cuments or copy thereof.

1. Name of Conveying party(ies):  
Otto Bock HealthCare GmbH

2. Name and address of receiving party(ies)

Name: Otto Bock HealthCare IP GmbH &amp; Co. KG

Internal  
Address:Street  
Address:

Max-Naeder-Strasse 15,

37115 Duderstadt, Germany

City: State: ZIP:

Additional names(s) and address(es) attached? ☐ Yes ☒ NoAdditional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:

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

Execution Date: March 17, 2006

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)

10/436,206

B. Patent No.(s)

Additional numbers attached: ☐ Yes ☒ No5. Name and address of party to whom correspondence concerning  
document should be mailed:

Name: Andrew M. Calderon

Internal Address: P27097

Street Address: GREENBLUM &amp; BERNSTEIN, P.L.C.

1950 Roland Clarke Place

City: Reston State: VA ZIP: 20191

6. Total number of applications and patents involved: 1

7. Total Fee (37CFR 3.41)

\$40.00

☒ Enclosed☐ Authorized to be charged to deposit account

8. Deposit account number:

19-0089

(Attach 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.

Andrew M. Calderon, Reg. No. 38,093

Name of Person Signing

Signature

Date

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

Mail documents to be recorded with required cover sheet information to:

Director of the United States Patent and Trademark Office, Mail Stop Assignments Recordation Services  
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Randolph Building  
401 Dulany Street  
Alexandria, VA 22314

PATENT

REEL: 017795 FRAME: 0796

**Declaration of Assignment**

We the undersigned owner of the following application

**No. US 10/436,206 filed on May 13, 2003  
for: A Rehabilitation Stroller**

herewith assign this with all rights and duties to

**Otto Bock HealthCare IP GmbH & Co. KG**

and agree that the assignment is recorded in the Patent Office.

**Place/Date:**

Duderstadt, den

17.03.2006

Otto Bock HealthCare GmbH

Signature of the assignor

**Declaration of Acceptance**

We hereby agree to the afore-mentioned assignment and apply for recording of the assignment in the registers of the Patent Office.

**Place/Date:**

Duderstadt, den

17.03.2006

Otto Bock HealthCare IP GmbH & Co. KG

Signature of the assignee