

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Dimitri T. Azar	01/03/2005
RECEIVING PARTY DATA	
Name:	Massachusetts Eye & Ear Infirmary--BOSTON
Street Address:	243 Charles Street
City:	Boston
State/Country:	MASSACHUSETTS
Postal Code:	02114
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	11421911
CORRESPONDENCE DATA	
Fax Number:	(877)769-7945
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	(617) 521-7034
Email:	izz@fr.com
Correspondent Name:	Faustino A. Lichauco
Address Line 1:	FISH & RICHARDSON P.C.
Address Line 2:	P.O.BOX 1022
Address Line 4:	MINNEAPOLIS, MINNESOTA 55440-1022
ATTORNEY DOCKET NUMBER:	00633-052002
NAME OF SUBMITTER:	Irja Zarembok
Total Attachments: 2 source=assignment#page1.tif source=assignment#page2.tif	

CH \$40.00 11421911

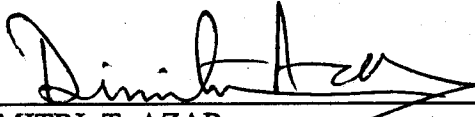
ASSIGNMENT

For valuable consideration, I, DIMITRI T. AZAR of 271 Clinton Road, Brookline, MA 02445, hereby assign to: Massachusetts Eye & Ear Infirmary, a corporation of Massachusetts having a place of business at:

243 Charles Street
Boston, MA 02114; and

its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of an application for United States Patent signed by me, entitled POLARIZATION SENSITIVE VISUAL PROSTHESIS, filed October 22, 2004, and assigned U.S. Serial Number 10/971,434, and I authorize and request the attorneys appointed in said application to hereafter complete this assignment by inserting above the filing date and serial number of said application when known; this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and I authorize the Assignee to apply in all countries in my name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and I agree for me and my respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

DATE:

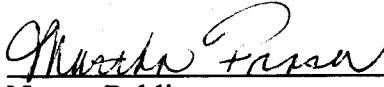
Jan 03, 2005
DIMITRI T. AZARSTATE OF MASSACHUSETTS)COUNTY OF Suffolk) SS.

On Jan. 3, 2005, before me, the undersigned, a notary public for the State of MASSACHUSETTS personally appeared DIMITRI T. AZAR personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same in his authorized capacity and that by his signature on the instrument the person or the entity upon behalf of which the person acted executed the instrument.

WITNESS my hand and official seal.



20932712.doc


Notary Public