Form PTO-1535 (Rev. 05/05) OMB No. 0651-0027 (exp. 05/02008)	1 - 30 - 2006 U.S. DEPARTMENT OF COMMERC United States Patent and Trademark C
	EET
	103342462 — Docket No.2861CIP (203-3492CO{)
	Office: Please record the attached documents or the new address(es) below.
1. Name of conveying party(ies)	2. Name and address of receiving party(ies)
1. Bruce K. Jankowski	Name: Tyco Healthcare Group LP
Additional name(s) of conveying party/ice) oftenhod?	Internal Address:
redutional name(s) of conveying party(les) attached?	
3. Nature of conveyance/Execution Date(s) Execution Date(s) 1.11/13/2006	Street Address: 195 McDermott Road
	City: North Haven
Security Agreement Change o	of Name
Joint Research Agreement	State: CT
Government Interest Assignment	Country: US Zip:06473
Executive Order 9424, Confirmatory Licer	nse Zip. <u>00473</u>
Other	Additional name(s) & address(es) attached? Yes I
4. Application or patent number(s):	☐ This document is being filed together with a new application
A. Patent Application No.(s) 11/515,660	B. Patent No.(s)
i	
Additional	numbers attached? Yes No
5. Name and address to whom correspond	at the same but onto
concerning document should be mailed:	linvolved:

Name: Mark Farber, Esq.

Street Address: 195 McDermott Road

Phone Number: (203) 845-1000

Internal Address:

City: North Haven

State:<u>c⊤</u>

Fax Number: (203) 492-8232 Authorized User Name ___ Email Address: 11/20/06 9. Signature: Signature Total number of pages including sover sheet, attachments, and documents. Neil D. Gershon, Reg. No. 32,225

Zip: 06473

Name of Person Signing

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to: Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450

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7. Total fee (37 CFR 1.21(h) & 3.41) \$_40.00

Authorized to be charged by credit card Authorized to be charged to deposit account

a. Credit Card Last 4 Numbers _

b. Deposit Account Number 21-0550

None required (government interest not affecting title)

Expiration Date __

Enclosed

8. Payment Information

PATENT

Trademark Office

Attorney Docket No. 2861CIP (203-3492PCTUSCIP) **PATENT**

For: [X] U.S. and/or [X] Foreign Rights For: [X] U.S. Application or [] U.S. Patent By: [X] Inventor(s) or [] Present Owner

ASSIGNMENT OF INVENTION

In consideration of the payment by ASSIGNEE to ASSIGNORS of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration, **ASSIGNORS:**

- 1. Keith L. Milliman
- 2. Bruce K. Jankowski
- Douglas J. Cuny
 Kevin Sniffin
- 5. Anthony Dato

(e)

[]

6. Richard D. Gresham

(If assignment is by person or entity to whom invention was previously assigned and this was recorded in PTO add the following)			
Recorded on:			
hereby sells, assigns and transfers to			
ASSIGNEE: TYCO Healthcare Goup, LP 195 McDermott Road North Haven, CT 06473 USA			
and the successors, assigns and legal representatives of the ASSIGNEE			
[X] the entire right, title and interest			
[] an undivided percent (%) interest for the United States and its territorial possessions			
[X] and in all foreign countries, including all rights to claim priority, the right to sue for present, past and future infringement, in the United States, its territorial possessions, and in all foreign countries, including all treaty and convention rights in and to the invention and any and all improvements entitled:			
SURGICAL STAPLING DEVICE			
and which is found in (a) [] U.S. patent application executed on even date herewith. (b) [] U.S. patent application executed on			

Page 1 of 6

filed on _____.
U.S. Patent No. _____ issued _____

PATENT **REEL: 018636 FRAME: 0350**

(f)	[]	PCT application Nofiled on
	[]	A change of address to which correspondence is to be sent regarding patent maintenance fees is being sent separately.
(g)	[X]	and any legal equivalent thereof in a foreign country, including the right to claim priority and, in and to, all Letters Patent to be obtained for said invention by the above application or any continuation, continuation-in-part, divisional, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof
has be	en or will	ASSIGNORS hereby covenants that no assignment, sale, agreement or encumbrance be made or entered into which would conflict with this assignment;
Traden	narks to i	ASSIGNORS hereby authorizes and requests the Commissioner of Patents and ssue all such Letters Patent to ASSIGNEE:
equival and de Letters represe part or rightful compe	ents; to the liver any Patents entatives; parts the oaths ar	ASSIGNORS further covenants to promptly provide all pertinent facts and documents essible to ASSIGNORS relating to said invention and said Letters Patent and legal testify as to the same in any interference, litigation or proceeding related thereto; to execute and all papers that may be necessary or desirable to perfect the title to said invention or any which may be granted therefor in said ASSIGNEE, its successors, assigns or other legal to execute any additional or divisional applications for patents for said invention, or any preof, and for the reissue of any Letters Patents to be granted therefor; and to make all add all lawful acts requisite for procuring the same or for aiding therein, all without further out at the sole expense of ASSIGNEE, its successors, assigns, or other legal
Serial I them.	√o. and/o	ASSIGNORS hereby grants ASSIGNEE and Assignee's attorneys the power to insert the or filing date of the above-described application(s) after such information becomes known to
IN WIT	NESS W	HEREOF, I/We have hereunto set hand and seal.
WARN		Date of signing must be the same as the date of execution of the application if item (a) was checked above.
1. <i>[[1</i>	Millimar	7 Millim 1/13/06
Bruce H	- [l K. Jankov	Date U(3/06 Date
3. Dougla	s J. Cuny	Date

Page 2 of 6

Date

4. Kevin Sniffin

State of Connecticut)	•
County of New Haven) ss: North Haver	ı
Before me this day of personally appeared <u>Keith L. Milliman</u> to me who executed the above instrument, and acknowled free will for the purposes therein set forth.	2006, e personally known to be the person described in and dged to me that he/she executed the same of his own
	Notary Public
AFFIX SEAL	
2.	
State of Massachusetts State of Connecticut) Bristol Bristol) ss: North Haven County of New Haven)	
Before me this 13th day of 1000 personally appeared Bruce K. Jankowski to and who executed the above instrument, and acknown free will for the purposes therein set forth.	ember 2006, o me personally known to be the person described in wledged to me that he/she executed the same of his
	Dates alice Xikly Notary Public
AFFIX SEAL	
	DOREEN ALICE KIRBY Notary Public Commonwealth of Massachusetts My Commission Expires Feb 13, 2009

Page 4 of 6

State of Connecticut)) ss: North Haven	
County of New Haven	
Before me this day of personally appeared Douglas J. Cuny to me personally appeared boundary to me personally appeared boundary to me personally appeared to me personal appeared	sonally known to be the person described in and
	Notary Public
AFFIX SEAL	
4	
State of Connecticut	
County of New Haven) ss: North Haven	
Before me this day of personally appeared <u>Kevin Sniffin</u> to me perso who executed the above instrument, and acknowledged to free will for the purposes therein set forth.	nally known to be the person described in and
-	Notary Public

AFFIX SEAL

3.

Page 5 of 6

State of Connecticut) County of New Haven)	ss: North Haven		
personally appearedAntho	e above instrument, a	to me personally known to be the persor and acknowledged to me that he/she execut	า ed the
		Notary Public	
AFFIX SEAL			
6.			
State of Connecticut) County of New Haven)	ss: North Haven		
Before me this <u>/3</u> day of <u>Jovenness</u> 2006, personally appeared <u>Richard D. Gresham</u> to me personally known to be the person described in and who executed the above instrument, and acknowledged to me that he/she executed the same of his own free will for the purposes therein set forth.			
		Jusan A John S	

AFFIX SEAL

SUSAN S. RICKARD

NOTARY PUBLIC
MY COMMISSION EXPRES AUG. 31, 2011

Page 6 of 6

Commonwealth of Massachusetts)
County of Bustal	s s.
On this the 13th day of November Month Adden Clice Kirley Name of Notary Public	, the undersigned Notary Public,
personally appeared Succession Name of the	MKOUSKE, me(s) of Signer(s)
proved to me through satisfactory evide	nce of identity, which was/were
Massachusetts Quiv Description of Evidence of	dentity descense,
W	be the person(s) whose name(s) was/were signed on the preceding or ttached document in my presence.
M.	Signature of Notary Public DOREEN Alice Kirby Printed Name of Notary y Commission Expires 2/13/2009
DOREEN ALICE KIRBY Notary Public Commonwealth of Massachusetts My Commission Expires Feb 13, 2009 Place Notary Seal and/or Any Stamp Above	
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Title or Type of Document: (Issignment) Document Date: 1/13/06 Number of Pa	geś:
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