Orm 170-1565 (Rev. 03/05) OMB No. 0651-0027 (exp. 6/30/2005) 12-0	U.S. DEPARTMENT OF COMMERCE  United States Patent and Trademark Office		
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ctor of the U.S. Patent and Trademark Office: Prease recording.			
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1) Michael Zemlok 2) Paul A. Scirica	Name: Tyco Healthcare Group LP		
,	Internal Address: 195 McDermott Road		
Additional name(s) of conveying party(ies) attached? Yes 🗸 No			
3. Nature of conveyance/Execution Date(s):	Street Address:		
Execution Date(s)1) 11/27/06; 2) 11/28/06			
✓ Assignment			
Security Agreement Change of Name	City: North Haven		
Joint Research Agreement	State: CT		
Government Interest Assignment			
Executive Order 9424, Confirmatory License	Country: USA Zip: 06473		
Other	Additional name(s) & address(es) attached? Yes Vo		
4. Application or patent number(s):	document is being filed together with a new application.		
A. Patent Application No.(s)	B. Patent No.(s)		
11/543,424			
Additional numbers att	ached? Yes No		
5. Name and address to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved:		
Name:Kimberly V. Perry	7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00		
Internal Address:Tyco Healthcare Group LP	Authorized to be charged by credit card		
	✓ Authorized to be charged by credit card		
Street Address: 195 McDermott Road	Enclosed		
	None required (government interest notaffecting title)		
City: North Haven	8. Payment Information		
State: CT Zip:06473	a. Credit Card Last 4 Numbers		
Phone Number: 203-492-8239	Expiration Date ਲੂ		
Fax Number: 203-492-8232	b. Deposit Account Number 21-0550 🛱 ڃ		
Email Address: kimberly.perry@tycohealthcare.com	Authorized User Name Kimberly V. Perey		
9. Signature:	2806		
Signature	Date		
Kimberiy V. Perry	Total number of pages including on the state of pages including on the state of pages including on the state of the state		
Name of Person Signing  Documents to be recorded (including cover sheet	sheet, attachments, and documents:		

Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:

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1) Michael Zemlok 2) Paul A. Scirica	Name: Tyco Healthcare Group LP	
2) Maui A. Scinca	Internal Address: 195 McDermott Road	
Additional name(s) of conveying party(ies) attached? Yes No  3. Nature of conveyance/Execution Date(s):	Street Address:	
Execution Date(s)1) 11/27/06; 2) 11/28/06		
Assignment Merger  Security Agreement Change of Name	City: North Haven	
Joint Research Agreement	State: CT	
Government Interest Assignment Executive Order 9424, Confirmatory License	Country: USA Zip: 06473	
Other	Additional name(s) & address(es) attached? ☐ Yes ✓ No	
11/543,424 Additional numbers att	tached? Yes No	
5. Name and address to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved:	
Name:Kimberly V. Perry	7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00	
Internal Address: Tyco Healthcare Group LP	Authorized to be charged by credit card  Authorized to be charged to deposit account	
Street Address: 195 McDermott Road	Enclosed  None required (government interest not affecting title)	
City: North Haven	8. Payment Information	
State: CT Zip:06473	a. Credit Card Last 4 Numbers Expiration Date	
Phone Number: 203-492-8239	b. Deposit Account Number 21-0550	
Fax Number: 203-492-8232 Email Address: kimberly.perry@tycohealthcare.com	Authorized User Name Kimberly V. Perry	
9. Signature:	11 28/06	
Signature Simberly V. Perry	Date Total number of pages including cover	
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PATENT REEL: 018659 FRAME: 0286 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**:

Michael Zemlok and Paul A. Scirica

(If assignment is by person or entity to whom invention was previously assigned and this was recorded in PTO add the following)  Recorded on:  Reel Frame hereby sells, assigns and transfers to				
ASSIGNEE:				
Tyco Healthcare Group LP (Type or print name of ASSIGNEE)  195 McDermott Road  Address  North Haven, CT 06473  USA  USA  Nationality				
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:				
METHOD AND FORCE-LIMITING HANDLE MECHANISM FOR A SURGICAL INSTRUMENT				
and which is found in  (a) [] U.S. patent application executed on even date herewith.  (b) [] U.S. patent application executed on  (c) [X] U.S. application Serial No.11/543,424 filed on October 5, 2006  (d) [] U.S. provisional application No. 60/  filed on  (e) [] U.S. Patent No issued  (f) [] PCT application No				
Page 1 of 3				

PATENT REEL: 018659 FRAME: 0287

	[]	filed onA change of address to which correspond regarding patent maintenance fee		
(g)	[X]	and, in and to, all Letters Patent to be obt	gn country, including the right to claim priority ained for said invention by the above application divisional, renewal, or substitute thereof, and as ation thereof	
has be	en or will	ASSIGNORS hereby covenants that no a be made or entered into which would con-	ssignment, sale, agreement or encumbrance flict with this assignment;	
Tradem	narks to i	ASSIGNORS hereby authorizes and requissue all such Letters Patent to ASSIGNEE		
ASSIGNORS further covenants to promptly provide all pertinent facts and documents known and accessible to ASSIGNORS relating to said invention and said Letters Patent and legal equivalents; to testify as to the same in any interference, litigation or proceeding related thereto; to execute and deliver any and all papers that may be necessary or desirable to perfect the title to said invention or any Letters Patents which may be granted therefor in said ASSIGNEE, its successors, assigns or other legal representatives; to execute any additional or divisional applications for patents for said invention, or any part or parts thereof, and for the reissue of any Letters Patents to be granted therefor; and to make all rightful oaths and do all lawful acts requisite for procuring the same or for aiding therein, all without further compensation, but at the sole expense of ASSIGNEE, its successors, assigns, or other legal representatives.				
Serial N them.	lo. and/c		and Assignee's attorneys the power to insert the ation(s) after such information becomes known to	
IN WIT	NESS W	HEREOF, I/We have hereunto set hand a	nd seal.	
WARNI	NG:	Date of signing must be the <b>same as</b> the was checked above.	date of execution of the application if item (a)	
Michae	ر I Zemlok		11/27/06 Dated	
Paul A.	Scirica	1. Some	11/28/06 Dated	
		ī	Dated	

[X] Notarization or Legalization Page Added.

Page 2 of 3

State of Connec	eticut ) ) ss
County of	New Haven )
	Before me this $\frac{27}{27}$ day of $1000000000000000000000000000000000000$
personally appe who executed the free will for the p	ared Michael Zembe to me personally known to be the person described in and ne above instrument, and acknowledged to me that he/she executed the same of his own purposes therein set forth.    Light Chael Zembe to me that he/she executed the same of his own purposes therein set forth.
AFFIX SEAL	REBECCA H. LAYMAN NOTARY PUBLIC MY COMMISSION EXPIRES AUG. 31, 2011
State of Connec	eticut )
County of New I	·
	Before me this 25 day of 1000 day 2006, ared 1000 A SCITIO of the personally known to be the person described in and the above instrument, and acknowledged to me that he/she executed the same of his own burposes therein set forth.  1000 A SCITIO of the personally known to be the person described in and the above instrument, and acknowledged to me that he/she executed the same of his own burposes therein set forth.  1000 A SCITIO of the personally known to be the person described in and the above instrument, and acknowledged to me that he/she executed the same of his own burposes therein set forth.  1000 A SCITIO of the personal of the person described in and the above instrument, and acknowledged to me that he/she executed the same of his own burposes therein set forth.  1000 A SCITIO of the personal of the person described in and the above instrument, and acknowledged to me that he/she executed the same of his own burposes therein set forth.  1000 A SCITIO of the personal of the personal of the person described in and the above instrument, and acknowledged to me that he/she executed the same of his own burposes therein set forth.
AFFIX SEAL	REBECCA H. LAYMAN  NOTARY PUBLIC  MY COMMISSION EXPRES AUG. 31, 2011

Page 3 of 3

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