OMB Na.* 0651-0027 (exp. 6/30/2005)	United States Patent and Trademark Offi	
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10335	2392	
To the Director of the U.S. Patent and Trademark Office: Plea	se 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) Tim Nolan 2) Ernie Aranyi	Name: Tyco Healthcare Group LP	
3) John F. Klinger	Internal Address: 195 McDermott Road	
Additional name(s) of conveying party(ies) attached? ☐ Yes ✔ N	d ————————————————————————————————————	
3. Nature of conveyance/Execution Date(s):	Street Address:	
Execution Date(s) 1) 06/04/00; 2)6/11/01; 3) 7/6/01		
Assignment Merger	900	
Security Agreement Change of Name	City: North Haven	
Joint Research Agreement	State: CT	
Government Interest Assignment	Country: USA Zip:06473	
Executive Order 9424, Confirmatory License		
Other	Additional name(s) & address(es) attached? Yes	
4. Application or patent number(s):A. Patent Application No.(s)	document is being filed together with a new application B. Patent No.(s)	
Additional numbers a 5. Name and address to whom correspondence	6. Total number of applications and patents	
5. Name and address to whom correspondence concerning document should be mailed:		
5. Name and address to whom correspondence concerning document should be mailed: Name: Mark Farber, Esq.	6. Total number of applications and patents involved: 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00	
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5. Name and address to whom correspondence concerning document should be mailed: Name: Mark Farber, Esq. Internal Address: Tyco Healthcare Group LP	6. Total number of applications and patents involved: 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	
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5. Name and address to whom correspondence concerning document should be mailed: Name: Mark Farber, Esq. Internal Address: Tyco Healthcare Group LP Street Address: 195 McDermott Road City: North Haven	6. Total number of applications and patents involved: 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 Enclosed None required (government interest not affecting tit	
5. Name and address to whom correspondence concerning document should be mailed: Name: Mark Farber, Esq. Internal Address: Tyco Healthcare Group LP Street Address: 195 McDermott Road City: North Haven State: CT Zip:06473	6. Total number of applications and patents involved: 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 Enclosed None required (government interest not affecting tit 8. Payment Information	
5. Name and address to whom correspondence concerning document should be mailed: Name: Mark Farber, Esq. Internal Address: Tyco Healthcare Group LP Street Address: 195 McDermott Road City: North Haven State: CT Zip:06473 Phone Number: 203-845-1000	6. Total number of applications and patents involved: 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 Enclosed None required (government interest not affecting tit 8. Payment Information a. Credit Card Last 4 Numbers	
5. Name and address to whom correspondence concerning document should be mailed: Name: Mark Farber, Esq. Internal Address: Tyco Healthcare Group LP Street Address: 195 McDermott Road City: North Haven State: CT Zip:06473 Phone Number: 203-492-8232	6. Total number of applications and patents involved: 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 Enclosed None required (government interest not affecting tit 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date	
5. Name and address to whom correspondence concerning document should be mailed: Name: Mark Farber, Esq. Internal Address: Tyco Healthcare Group LP Street Address: 195 McDermott Road City: North Haven State: CT Zip:06473 Phone Number: 203-845-1000 Fax Number: 203-492-8232 Email Address: kimberly.perry@tycohealthcare.com	6. Total number of applications and patents involved: 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 Enclosed None required (government interest not affecting tit 8. Payment Information a. Credit Card Last 4 Numbers Expiration Date b. Deposit Account Number 21-0550 Authorized User Name	
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Documents to be recorded (including cover sheet) should be faxed to (703) 306-5995, or mailed to:

Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450

ASSIGNMENT OF INVENTION

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

ASSIGNOR:

Tim Nolan Ernie Aranyi John F. Klinger Keith Ratcliff

John Charles Robertson

(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:

United States Surgical,

A Division of Tyco Healthcare Group, LP

150 Glover Avenue Norwalk, CT 06856

U. S. A.

and the successors, assigns and legal representatives of the ASSIGNEE the entire right, title and interest, including 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:

APPARATUS AND METHOD FOR PERFORMING A BYPASS PROCEDURE IN A DIGESTIVE SYSTEM

which is described in

- (a) PCT. patent application No. PCT/US01/7105, filed March 5, 2001, designating the U.S.
- (b) [] U.S. patent application executed on
- (c) [X] U.S. provisional application, Serial No. 60/187,121, filed on March 6, 2000
- (d) [] U.S. patent no. _____ issued

(also check (e) if foreign application(s) is also being assigned)

(e) [x] and any legal equivalent thereof in a foreign country, and, in and to, all United States and foreign Letters Patent, for the full term thereof, to be obtained for said invention by the above application or any continuation, division, renewal, extension or substitute thereof, and as to letters patent any re-issue or re-examination thereof;

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment;

ASSIGNOR hereby authorizes and requests the Commissioner of Patents and Trademarks to issue all such Letters Patent to ASSIGNEE:

Page 1 of 5

ASSIGNOR further covenants to promptly provide all pertinent facts and documents known and accessible to ASSIGNOR 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.

ASSIGNOR hereby grants ASSIGNEE and Assignee's attorneys the power to insert the Serial No. and/or filing date of the above-described application(s) after such information becomes known to them.

IN WITNESS WHEREOF, I have hereunto set hand and seal.

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HVENTORS.	
Name: Tim Nolan	Dated: 4 July 205
Name: Ernie Aranyi	Dated: 6-11-01
Name: John F. Klinger	Dated: 7-6-01
Name: Keith Ratcliff	Dated:
Name: John Charles Robertson Also Known As: Jack Robertson	Dated:

State of Connecticut	
County of Farfuld ss	
Before me this 4 day of June personally appeared Tim Noisa to mexecuted the above instrument, and acknowledged to purposes therein set forth.	e personally known to be the person described in and who me that he/she executed the same of his own free will for the
	Vanessa Massel Notary Public
AFFIX SEAL	VANESSA MASTRI NOTARY PUBLIC MY COMMISSION EXPIRES FEB. 28, 2005
State of Connecticut	
County of NEW HAVEN SS NO.	2001, e personally known to be the person described in and who
Before me this day of to me personally appeared to me executed the above instrument, and acknowledged to purposes therein set forth.	the that he she executed the same of his own nee will for the
	Money Public Strker
AFFIX SEAL	My Commission Expires June 30, 2005

State of Connecticut	
County of	SS
personally appeared Control K executed the above instrument, and	day of
purposes therein set forth.	
	Notary Public
AFFIX SEAL	VANESSA MASTRI NOTARY PUBLIC NY COMMISSION EXPIRES FEB. 28, 2005
State of Connecticut	
County of	SS
personally appeared	day of2001,to me personally known to be the person described in and who acknowledged to me that he/she executed the same of his own free will for the
	Notary Public
AFFIX SEAL	

Page 4 of 5

Attorney's Docket No. 2602PCT

State of Connecticut	
SS	
County of	
Before me this day o	f2001,
personally appeared	to me personally known to be the person described in and who
executed the above instrument, and acknow	ledged to me that he/she executed the same of his own free will for the
purposes therein set forth.	
purposes dictoria sec total.	
	Notary Public
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AFFIX SEAL

Page 5 of 5