\$40.00 118458

PATENT ASSIGNMENT

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
Stephan KER	11/07/2007
Laurent DUVAL	11/07/2007

RECEIVING PARTY DATA

Name:	IFP	
Street Address:	1 & 4 avenue de Bois-Preau	
Internal Address:	RUEIL MALMAISON	
City:	Cedex	
State/Country:	FRANCE	
Postal Code:	92852	

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	11845819

CORRESPONDENCE DATA

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ATTORNEY DOCKET NUMBER:	612.47749X00
NAME OF SUBMITTER:	Alan E. Schiavelli

Total Attachments: 1

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PATENT

REEL: 020108 FRAME: 0317

	FORM COVER SHEET U.S. DEPARTMENT OF COMMERCE		
(Rev. 10/02) PATEN	NTS ONLY U.S. Patent and Trademark Office		
OMB No. 0651-0027 (exp. 6/30/2005)	Attorney Docket No. 612.47749X00		
To the Honorable Commissioner of Patents and Trademark	s: Please record the attached original documents or copy thereof.		
Name of conveying party(ies): Stephan KER Laurent DUVAL	Name and address of receiving party(ies) Name: IFP		
Additional name(s) of conveying party(ies) attached? Yes	No Street Address: 1 & 4 avenue de Bois-Preau 92852 Rueil Malmaison Cedex FRANCE		
3. Nature of conveyance/ Execution Date: November 7, 200	7		
	Additional name(s) & address(es) attached? ☐ Yes ☒ No		
4. Application number(s) or patent number(s):	☐ This document is being filed together with a new application.		
A. Patent Application No.(s)	B. Patent Registration No.(s)		
11/845,819			
	(s) attached ☐ Yes ⊠ No		
Name and address of party to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved 1		
Name: ANTONELLI, TERRY, STOUT & KRAUS, LLF Internal Address: 1300 NORTH 17 TH STREET – SUITE 1800	7. Total fee (37 CFR 3.41)		
	C. Davis and Information		
City: ARLINGTON State: VA Zip 22209 Phone Number: (703) 312-6600 Facsimile Number: (703) 312-6666 Email Address: email@antonelli.com	8. Payment Information: a. Credit Card Last 4 numbers: 1065 Expiration date: 06/10 b. Deposit account number: 01-2135		
	Authorized User Name: Alan E. Schiavelli		
DO NOT	USE THIS SPACE		
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.			
Alan E. Schiavelli, Reg#32,087 /Alan E. S	Schiavelli/ 11/14/2007		
Name of Person Signing Sig	gnature Date		

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

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