Form PTO-1595 (Rev. 07/05) OMB No. 0651-0027 (exp. 6/30/2008)	U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Offic
RECORDATION FORM COVER SHEET PATENTS ONLY To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.	
ALEX URICH	2. Name and address of receiving party(ies) Name: DANA, LLC
ARMAND MAASKAMP	
	Internal Address:
Additional name(s) of conveying party(ies) attached? 🗌 Yes 🗸 No	o
3. Nature of conveyance/Execution Date(s):	Street Address: <u>37 SHIELD</u>
Execution Date(s) 10 APRIL 2008	· · · · · · · · · · · · · · · · · · ·
Assignment Merger	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Security Agreement Change of Name	City: IRVINE
Joint Research Agreement	State: CALIFORNIA
Government Interest Assignment	
Executive Order 9424, Confirmatory License	Country: USA Zip: 92618
Other	
4. Application or patent number(s):	Additional name(s) & address(es) attached? Yes Mo document is being filed together with a new application.
Additional numbers at	tached? ☐ Yes ✔No
5. Name and address to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved: 1
Name:_JOSHUA C. HARRISON, ESO.	7. Total fee (37 CFR 1.21(h) & 3.41) \$40.00
Internal Address:	Authorized to be charged by credit card
	Authorized to be charged to deposit account
Street Address: 22091 WOOD ISLAND LANE	
	None required (government interest not affecting title)
City: HUNTINGTON BEACH	8. Payment Information
State: CALIFORNIA Zip: 92646	a. Credit Card Last 4 Numbers
Phone Number: (714) 342-2391	Expiration Date
Fax Number: (949) 258-5752	b. Deposit Account Number <u>50-4119</u>
Email Address; josh@bhlplaw.com	Authorized User Name Joshua C. Harrison
9. Signature:	
Signature	
Joshua C. Harrison, Esg., Reg# 45,686	Total number of pages including cover
Name of Person Signing	sheet, attachments, and documents: 5

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

PATENT REEL: 020933 FRAME: 0428

PATENT Atty. Docket No.: DAN-0002-P

ASSIGNMENT

Whereas, we, Alex Urich, a citizen of USA, residing at Rancho Santa Margarita, California, and Armand Maaskamp, a citizen of USA, residing at Coto de Casa, California, have invented certain new and useful improvements in a VACUUM SURGE SUPPRESSOR FOR SURGICAL ASPIRATION SYSTEMS (hereafter "Improvements") for which we have executed an application for a United States Patent filed APRIL 25, 2008, Application No. 12/109,586 (hereafter "Application"); and

Whereas, **Dana LLC** (hereafter "Assignee"), a California Limited Liability Company, desires to acquire the entire right, title, and interest in and to the Improvements and the Application;

Now, therefore, that for good and valuable consideration, the receipt of which is hereby acknowledged, we hereby acknowledge that we have sold, assigned, transferred and set over, and by these presents do hereby sell, assign, transfer and set over, unto the Assignee, its successors, legal representatives and assignees, the entire right, title, and interest throughout the world in, to and under the Improvements, and the Application (including all applications to which the Application claims priority) and all divisions, renewals and continuations thereof, and all Letters Patent of the United States which may be granted thereof and all reissues and extensions thereof, and all rights of priority under International Conventions and applications for Letters Patent which may hereafter be filed for the Improvements in any country or countries foreign to the United States and all extensions, renewals and reissues thereof; and we hereby authorize and request the Commissioner of Patents of the United States, and any Official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid, to issue all Letters Patents for the Improvements to the Assignee, its successors, legal representatives and assigns, in accordance with the terms of this instrument.

We hereby covenant and agree that we will communicate to the Assignee, its successors, legal representatives and assigns, any facts known to me respecting the Improvements, and testify in any legal proceeding, sign all lawful papers, execute all divisional, continuing and reissue applications, make all rightful oaths and aid the Assignee, its successors, legal representatives and assigns, to obtain and enforce proper patent protection for the Improvements in all countries.

ASSIGNMENT

PATENT Atty. Docket No.: DAN-0002-P

Title of Invention: VACUUM SURGE SUPPRESSOR FOR SURGICAL ASPIRATION SYSTEMS

ex Uride

Alex Urich

<u>04/10/08</u> Date

State of California)) ss. County of)

_ `

On ______, before me, ______, Notary Public, personally appeared Alex Urich and 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/she executed the same in his/her authorized capacity, and that by his/her 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.

See Attached la alle Purpose Certification Acknowledgement

PATENT REEL: 020933 FRAME: 0430

ASSIGNMENT

PATENT Atty. Docket No.: DAN-0002-P

Title of Invention: VACUUM SURGE SUPPRESSOR FOR SURGICAL ASPIRATION SYSTEMS

Armand Maas

State of California

County of ORANGE

Date



On **Afril 10, 2008**, before me, **James Peter Livey**, Notary Public, personally appeared **Armand Maaskamp** and 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 same in his Area authorized capacity, and that by his Area 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.

Same Oster Jill

PATENT REEL: 020933 FRAME: 0431

Page 3 of 3

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT	
State of California	
County of Orange	
On April 10th 200d before me, Brian	Ch. Notary Public (Here insert name and title of the officer)
personally appeared <u>Alex</u> Uric	μ,
who proved to me on the basis of satisfactory evid the within instrument and acknowledged to me that	ence to be the person(s) whose name(s)(s) are subscribed to a he she have been a same in his her/their authorized on the instrument the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY under the is true and correct.	e laws of the State of California that the foregoing paragraph
	BRIAN ÖH Commission # 1729349 Notary Public - California
WITNESS my hand and official seal.	Orange County
Signature of Notary Public	(Notary Seal)
Signature or Notary Public	
ADDITIONAL OPTIONAL INFORMATION	
	INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as
DESCRIPTION OF THE ATTACHED DOCUMENT	appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a
(Title or description of attached document)	document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the
	verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the
(Title or description of attached document continued)	document carefully for proper notarial wording and attach this form if required.
Number of Pages $\underline{\mathcal{A}}$ Document Date $\underline{\mathcal{A}}/\underline{\mathcal{A}}$	 State and County information must be the State and County where the document
	signer(s) personally appeared before the notary public for acknowledgment.
(Additional information)	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
(Additional information)	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
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CAPACITY CLAIMED BY THE SIGNER	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (<i>i.e.</i> he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible.
CAPACITY CLAIMED BY THE SIGNER	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (<i>i.e.</i> he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Parmer(s)	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (<i>i.e.</i> he/shc/filey, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partmer(s) Attorney-in-Fact	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /sre) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smulges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Parmer(s)	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they; is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary stal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk.

PATENT

REEL: 020933 FRAME: 0432

²⁰⁰⁸ Version CAPA v12 10.07 800-873-9865 www.NotaryClasses.com **RECORDED: 05/10/2008**