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	RM COVER SHEET U.S. DEPARTMENT OF COMMERCE
(Rev. 10/02) PATENTS	
OMB No. 0651-0027 (exp. 6/30/2005)	Attorney Docket No. 785.48132X00
To the Honorable Commissioner of Patents and Trademarks: §	Please record the attached original documents or copy thereof.
Name of conveying party(ies): Dirk MAYER Tobias MELZ, Martin THOMAIER	2. Name and address of receiving party(ies) Name: FRAUNHOFER-GESELLSCHAFT zur FÖRDERUNG der angewandten Forschung e.V.
Additional name(s) of conveying party(ies) attached? 🗌 Yes 🛭 No	Street Address: Hansastr. 27c
3. Nature of conveyance/ Execution Date: June 19, 2008, June 17, 2008, June 19, 2008 .	City: State: Zip: 80686 Munchen, GERMANY
Security Agreement Change of Name Joint Research Agreement Government Interest Assignment Executive Order 9424, Confirmatory License Other.	Additional name(s) & address(es) attached? ☐ Yes ☒ №o
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)
11/914,818	
Additional number(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
Name: ANTONELLI, TERRY, STOUT & KRAUS, LLP	7. Total fee (37 CFR 3.41) \$40.00
Traine. Air 10 Na air, 12 air,	Authorized to be charged by credit card
Intemal Address:	□ Authorized to be charged by credit card □ Authorized to be charged to deposit account □ Enclosed □ None required (government interest not affecting title)
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Intemal Address:	Authorized to be charged to deposit account
Internal Address: 1300 NORTH 17 TH STREET – SUITE 1800 City: ARLINGTON State: VA Zip 22209 Phone Number: (703) 312-6600 Facsimile Number: (703) 312-6666	Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information: a. Credit Card Last 4 numbers: 1107 Expiration date: 6/10
Internal Address: 1300 NORTH 17 TH STREET – SUITE 1800 City: ARLINGTON State: VA Zip 22209 Phone Number: (703) 312-6600 Facsimile Number: (703) 312-6666 Email Address: email@antonelli.com	Authorized to be charged to deposit account Enclosed None required (government interest not affecting title) 8. Payment Information: a. Credit Card Last 4 numbers: 1107 Expiration date: 6/10 b. Deposit account number: 01-2135
Internal Address: 1300 NORTH 17 TH STREET – SUITE 1800 City: ARLINGTON State: VA Zip 22209 Phone Number: (703) 312-6600 Facsimile Number: (703) 312-6666 Email Address: email@antonelli.com	□ Authorized to be charged to deposit account □ Enclosed □ None required (government interest not affecting title) 8. Payment Information: a. Credit Card Last 4 numbers: 1107 □ Expiration date: 6/10 b. Deposit account number: 01-2135 Authorized User Name: Paul J. Skwierawski E THIS SPACE
Internal Address: 1300 NORTH 17 TH STREET – SUITE 1800 City: ARLINGTON State: VA Zip 22209 Phone Number: (703) 312-6600 Facsimile Number: (703) 312-6666 Email Address: email@antonelli.com DO NOT US 9. Statement and signature. To the best of my knowledge and belief, the foregoing in	□ Authorized to be charged to deposit account □ Enclosed □ None required (government interest not affecting title) 8. Payment Information: a. Credit Card Last 4 numbers: 1107 □ Expiration date: 6/10 b. Deposit account number: 01-2135 Authorized User Name: Paul J. Skwierawski E THIS SPACE

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, VA 22313-1450

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