PATENT ASSIGNMENT

Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
Thomas James GRAHAM M.D.	09/09/2008
Louise M. FOCHT	11/05/2008

RECEIVING PARTY DATA

Name:	Mimedx, Inc.
Street Address:	1234 Airport Road
Internal Address:	Suite 105
City:	Destin
State/Country:	FLORIDA
Postal Code:	32541

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	12203221

CORRESPONDENCE DATA

Fax Number: (407)841-2343

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

Phone: 407-841-2330

Email: npardo@addmg.com

Correspondent Name: ALLEN, DYER, DOPPELT, MILBRATH & GILCHRI
Address Line 1: 1401 CITRUS CENTER 255 SOUTH ORANGE AVEN

Address Line 2: P.O. BOX 3791

Address Line 4: ORLANDO, FLORIDA 32802-3791

ATTORNEY DOCKET NUMBER:	60282
NAME OF SUBMITTER:	Jack G. Abid

Total Attachments: 3

source=60282_Assignment#page1.tif

PATENT REEL: 021815 FRAME: 0926

500700887

P 840.00 1

source=60282_Assignment#page2.tif source=60282_Assignment#page3.tif

PATENT REEL: 021815 FRAME: 0927

ASSIGNMENT

WHEREAS, Thomas James GRAHAM, M.D. of Timonium, MD, and Louise M. FOCHT of Del Mar, CA; hereinafter referred to as ASSIGNORS, have made certain improvements or inventions in MODULAR BONE FIXATION DEVICE FOR TREATMENT OF FRACTURES AND RELATED METHODS, for which ASSIGNORS have executed an application for United States Letters Patent filed on September 3, 2008 in the United States Patent and Trademark Office; and assigned serial no. 12/203,221; and

WHEREAS, MIMEDX, INC., a Florida corporation, hereinafter referred to as ASSIGNEE, is desirous of acquiring the same;

NOW THEREFORE, This Indenture Witnesseth: That for good and valuable consideration, receipt whereof is hereby acknowledged, said ASSIGNORS do hereby sell, assign and transfer to said ASSIGNEE, its successors and assigns, all right, title and interest in and to said United States Patent application, the invention or inventions therein shown and described and any improvements on said inventions heretofore or hereafter made, any divisions or continuations of said application, and all patents, United States and foreign, to be granted upon any such application or for the invention or inventions thereof, and any reissues, continuations or extensions of said patents; and said ASSIGNORS do hereby authorize and request the Commissioner of Patents to issue all patents on said United States Patent applications or for the invention or inventions hereof, in accordance with this assignment.

1

And said ASSIGNORS for said consideration hereby covenants and agrees that said ASSIGNORS are the owners of the full title herein conveyed and have the right to convey the same, and agree that said ASSIGNORS will communicate to said ASSIGNEE any facts known to said ASSIGNORS respecting said invention or inventions, and testify in any legal proceedings when called upon by said ASSIGNEE, sign all lawful papers deemed by said ASSIGNEE as expedient to vest in it the legal title herein sought to be conveyed or for the filing and prosecution of all applications and patents, United States and foreign, and otherwise aid said ASSIGNEE, its successors and assigns, in obtaining full patent protection on said invention and enforcing proper protection under said patents, but in every instance at the ASSIGNEE'S expense.

In Witness Whereof, I have hereunto set my hand and seal this $q^{\tau t}$ day of <u>SEPTEMBER</u>, <u>and</u>.

Thomas James GRAHAM, M.D.

State of MARYLAND:

city: ss

County of BALTIMORE:

On this QTH day of SEPTEMBER, 2005, before me personally appeared the above-named ASSIGNOR, Thomas James GRAHAM, M.D., to me personally known as the individual who executed the foregoing assignment, and who acknowledged to me that he executed the same of his own free will for the purposes therein set forth.

SEAL

Notary Public

My commission expires: (0/8/aDI)

LINDA L. HEATH

Notary Public

2

State of Maryland
Baltimore City
My commission exp. October 8, 2011

In Witness Where	of, I have hereunto set my hand
and seal this 5 day of \angle	
	Fruis M Frekt
•	Louise M. FOCHT
State of Florida:	
State of Florida: ss. County of Hillsborougn	
On this 5th da	y of November, 2008,
before me personally appeared t	the above-named ASSIGNOR, Louise M.
FOCHT, to me personally known a	as the individual who executed the
foregoing assignment, and who a	cknowledged to me that he executed
	for the purposes therein set forth.
	210 · / C
•	Notary Public
S E A L	My commission expires:

GEORGETTA DIXON
Notary Public - State of Florida
My Commission Expires Jul 19, 2010
Commission # DD 575963
Bonded By National Notary Assn.