Assi Dire	ector and T	ent Recordation Services RECORDATION FORM PATENTS ( 'rademark Office x 1450							
Ale	xand	ria, VA 22313-1450	Attorney Docket No. 136503						
		cord the attached document.  The stack of pages including cover sheet, attachments, and documents.	ent: 2						
1.	A. B.	Name of conveying parties: Thomas R. K. EDWARDS Anthony K. ATWELL Additional name(s) of conveying party(ies) attached?  ☐ Yes ☒ No	2. A. Name and address of receiving party:  GYRUS MEDICAL LIMITED  FORTRAN ROAD, ST. MELLONS,  CARDIFF CF3 0LT UNITED KINGDOM						
3.	A. 🗵	Nature of conveyance:  Assignment	B. Additional name(s) & address(es) attached? ☐Yes ☑ No .						
	В.	Execution Date: (ALL) March 11, 2009							
4.	Α.	Patent Application No.(s) 12/379,676	B. Patent No.(s)						
	Additional numbers attached?   Yes   No								
	C.	Title of Application: SURGICAL INSTRUMENT							
5.		ne and address of party to whom correspondence cerning document should be mailed:	6. Total number of applications and patents involved: 1						
	Na	me: Thomas J. Pardini	7. Please charge Deposit Account No. 15-0461 the total fee (37 CFR 3.41) in the amount of \$40.00.						
	Ac	ddress: OLIFF & BERRIDGE, PLC P.O. Box 320850 Alexandria, VA 22320-4850 Phone Number: 703-836-6400 Fax Number: 703-836-2787	Credit any overpayment or charge any underpayment to deposit account number 15-0461.						
9.	To orig	tement and signature. the best of my knowledge and belief, the foregoing informati ginal document.  Discourage of the foregoing informati ginal document.  Discourage of the foregoing informati and the foregoing informati	ion is true and correct and any attached copy is a true copy of the  Date: March 26, 2009						

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			73	<b>SSIGNMENT</b>	_		
		(1)	Thomas R. K., I	EDWARDS	(5)		·-·
(1-8)	Insert	(2)					
	Name(s) of Inventor(s)	(3)					
		(4)					
			In consideration of the undersign	of the sum of one de	bns (00,12) rallo	other good and va	Nuable consideration pairs assign, transfer and set
(9)	Insert Name of	(fi)	CWINDE MEDI	CALIBARRO			
(10)	Assignee Insert Address of Assigner	(9)	GYRUS MEDI				
		(10)	<u>FORTRAN RO</u>	AD, ST. MELLON	S, CARDIFF CF	OLT UNITIED K.	INGDOM
		invent contin	tire right, title and lion, and in all appl quation, internation	interest for the Unite lications for patent in	ed States of Amer noluding any and estitute and reissu	ion us defined in 3 all provisional, no e application(s), a	s and legal representatives 5 U.S.C. §100, in the n-provisional, divisional, nd all Letters Parent, vention known as
(11)	Insert	(11)	Surgical Instru	ment			
	identification such as Title, Case						
	Number, or Foreign					<del></del>	
	Application Number	-	mey Docket No.				<del></del>
		for wh	tich the undersigner on date herewith or	ed has (have) execu r	ted an applicatio	n for patent in the	United States of Americ
(12)	Insert Date of					į	
	Signing of	(12)	on	<del>-</del>			
	Application						
(13)	Alternative Identification for	(13)	U.S. application	Serial Number			
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