

Attorney Docket No. OM156709KY-US

Form PTO-1595 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005) Tab settings ⇌ ⇌ ⇌ ▼ ▼ ▼ ▼ ▼ ▼ ▼		RECORDATION FORM COVER SHEET PATENTS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
To the Honorable Commissioner of Patents and Trademarks. Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies):  Ryo MACHIDA		2. Name and address of receiving party(ies) Name: OLYMPUS MEDICAL SYSTEMS CORP. Internal Address: _____ _____ _____ Street Address: 43-2, Hatagaya 2-chome Shibuya-ku City: Tokyo State: Japan Zip: 151-0072 Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____					
Execution Date: May 26, 2009					
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: _____ A. Patent Application No.(s) 12/476,544 B. Patent No.(s) Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: ARNOLD INTERNATIONAL Internal Address: Bruce Y. Arnold _____ _____ Street Address: P.O. Box 129 _____ City: Great Falls State: VA Zip: 22066		6. Total number of applications and patents involved: <input type="checkbox"/> 1 7. Total fee (37 CFR 3.41): \$ 40.00 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: 01-2509 (Attach duplicate copy of this page if paying by deposit account)			
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. Bruce Y. ARNOLD /Bruce Y. Arnold/ June 2, 2009 Name of Person Signing Signature Date Total number of pages including cover sheet, attachments, and documents: <input type="checkbox"/> 2 Mail documents to be recorded with required cover sheet information to: Commissioner of Patents & Trademarks, Box Assignments Washington, D.C. 20231					

CH \$40.00 012509 12476544

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**U.S. ASSIGNMENT**

FOR GOOD AND VALUABLE CONSIDERATION, the adequacy and receipt of which is hereby acknowledged by the undersigned inventor(s) (hereinafter ASSIGNOR) by

(Insert ASSIGNEE's  
Name(s) Address(es))

OLYMPUS MEDICAL SYSTEMS CORP. of

43-2, Hatagaya 2-Chome, Shibuya-Ku, Tokyo 151-0072 Japan

(hereinafter ASSIGNEE), the undersigned ASSIGNOR hereby sells, assigns and transfers to ASSIGNEE the entire and exclusive right, title and interest in the invention entitled

(Title of Invention)

**OBJECTIVE OPTICAL SYSTEM AND ENDOSCOPE**

for which application for Letters Patent of the United States was executed on even date herewith unless otherwise indicated below:

filed on \_\_\_\_\_ Application No. \_\_\_\_\_

( Arnold International is hereby authorized to insert the series code, serial number and/or filing date hereon, when known)

and all Letters Patent of the United States to be obtained therefore on said application or any continuation, divisional, substitute, reissue or reexamination thereof for the full term or terms for which the same may be granted.

The ASSIGNOR agrees to execute all papers necessary in connection with the application and any continuation, divisional, reissue or reexamination applications thereof and also to execute separate assignments in connection with such applications as the ASSIGNEE may deem necessary or expedient.

The ASSIGNOR agrees to execute all papers necessary in connection with any interference, litigation, or other legal proceeding which may be declared concerning this application or any continuation, divisional, reissue or reexamination thereof or Letters Patent or reissue patent issued thereon and to cooperate with the ASSIGNEE in every way possible in obtaining and producing evidence and proceeding with such interference, litigation, or other legal proceeding.

IN WITNESS WHEREOF, the undersigned inventor(s) has (have) affixed his/her/their signature(s).

(Signatures)

Ryo Machida  
(Signature)

Ryo MACHIDA  
(Type Name)

May, 26, 2009  
(Date)

\_\_\_\_\_  
(Signature)

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(Date)

NO LEGALIZATION REQUIRED

**PATENT****REEL: 022771 FRAME: 0604**

**ARNOLD INTERNATIONAL**  
**Facsimile Cover Sheet**

Date: June 2, 2009

To: Assignment Recordation Services  
Director of USPTO

Fax No.: 571-273-0140

From: Bruce Arnold *Bruce Arnold*

Fax No.: 703-759-2967

Tele. No: 703-759-2991

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Re: Application No. 12/476,544 entitled - "Objective Optical System and Endoscope"

Comments: A Recordation Form Cover Sheet (1 page, plus a duplicate page), and an Assignment (1 page) follow.

The total number of pages, including this cover sheet, are: 4

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