

PATENT ASSIGNMENT

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
CASEY K. LEE	06/09/2009
RECEIVING PARTY DATA	
Name:	RE-SPINE LLC
Street Address:	11 Indian Lane
City:	Florham Park
State/Country:	NEW JERSEY
Postal Code:	07932
PROPERTY NUMBERS Total: 1	
Property Type	Number
Patent Number:	7537611
CORRESPONDENCE DATA	
Fax Number:	(703)610-8686
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	7039039000
Email:	erussell@milesstockbridge.com
Correspondent Name:	Mitchell W. Shapiro
Address Line 1:	1751 Pinnacle Drive, Suite 500
Address Line 4:	McLean, VIRGINIA 22102-3833
ATTORNEY DOCKET NUMBER:	A-9864/T3603-908531US01
NAME OF SUBMITTER:	Mitchell W. Shapiro
Total Attachments: 2 source=A9864Assignment#page1.tif source=A9864Assignment#page2.tif	

CH \$40.00 7537611

Assignment

WHEREAS, I/WE, Casey K. Lee, residing at 11 Indian Lane, Florham Park, NJ 07932, have made an invention entitled FACET JOINT PROSTHESIS for which I have filed an application for Letters Patent of the United States on July 19, 2004 under Application No. 10/893,243; and

WHEREAS, RE-SPINE LLC ("ASSIGNEE"), a citizen of _____ or a corporation or other business entity organized under the laws of New Jersey, and whose postal address is 11 Indian Lane Florham Park, NJ 07932, desires to acquire the entire right, title, and interest in and to the invention, the application, and any Letters Patent to be granted for the invention in the United States and in all foreign countries;

NOW, THEREFORE, in consideration of One Dollar (\$1.00) paid to me/us by ASSIGNEE, and other good and valuable consideration, the receipt and sufficiency of which I/We acknowledge, I/We, have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto ASSIGNEE, its successors, legal representatives, and assigns, the entire right, title, and interest in and to the invention, the application, all applications claiming benefit of the application, including, but not limited to, all divisions and continuations of the application, and all Letters Patent that may be granted thereon in the United States and in all foreign countries, and all reissues thereof, together with the right to claim priority under the International Convention in all member countries; and I/We authorize and request the Director of the United States Patent and Trademark Office to issue all Letters Patent for the invention to ASSIGNEE, its successors, legal representatives, and assigns in accordance with the terms of this Assignment;

AND I/We covenant and agree that I/We have the full right to convey the entire right, title, and interest herein assigned and that I/We have not executed and will not execute any assignment or other instrument in conflict with this Assignment;

AND I/We further covenant and agree that upon request by ASSIGNEE, its successors, legal representatives, and/or assigns, and without further consideration, I/We will do all lawful acts that may be necessary or desirable to assist ASSIGNEE, its successors, legal representatives, and/or assigns to obtain and enforce patent protection for the invention in the United States and in all foreign countries, including, but not limited to, communicate with ASSIGNEE, its successors, legal representatives, and/or assigns any facts known to me/us regarding the invention, testify in any legal proceeding, sign all lawful papers, execute and deliver all papers that may be necessary or desirable to perfect the title to the invention in ASSIGNEE, its successors, legal representatives, and/or assigns, execute all divisional, continuation, and reissue applications, and make all rightful oaths, it being understood that any expense incident to the rendering of such assistance will be borne by ASSIGNEE, its successors, legal representatives, and/or assigns;

AND I/WE further hereby authorize ASSIGNEE or its attorneys or agents to insert the correct application number and filing date into this Assignment, if none is indicated on that date of my/our execution of this Assignment.

IN WITNESS WHEREOF, I/We have executed this Assignment on the date(s) indicated below.

Signature: *Casey K. Lee*
Date: June 9, 2009
Full Name: Casey K. Lee, MD.
Address: 11 Indian Lane
Florham Park, NJ 07932

Signature: _____
Date: _____
Full Name: _____
Address: _____

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