

PATENT ASSIGNMENT

Electronic Version v1.1

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	09/23/2009
CONVEYING PARTY DATA	
Name	Execution Date
POWER MEDICAL INTERVENTIONS, INC.	09/23/2009
RECEIVING PARTY DATA	
Name:	POWER MEDICAL INTERVENTIONS, LLC
Street Address:	15 HAMPSHIRE STREET
City:	MANSFIELD
State/Country:	MASSACHUSETTS
Postal Code:	02048
PROPERTY NUMBERS Total: 53	
Property Type	Number
Patent Number:	6443973
Patent Number:	6716233
Patent Number:	6517565
Patent Number:	6315184
Patent Number:	6264087
Patent Number:	6348061
Patent Number:	6488197
Patent Number:	6491201
Patent Number:	6533157
Patent Number:	6793652
Application Number:	09836781
Application Number:	09887789
Patent Number:	6505768
Application Number:	09999546

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PATENT
REEL: 023312 FRAME: 0592

Patent Number:	6716230
Application Number:	10094051
Application Number:	10099634
Application Number:	10098217
Application Number:	10127310
Application Number:	10128768
Application Number:	10176432
Patent Number:	6849071
Patent Number:	6846308
Patent Number:	6846307
Patent Number:	6846309
Patent Number:	6681979
Application Number:	10309532
Patent Number:	6695199
Application Number:	10355906
Patent Number:	6698643
Application Number:	10460291
Application Number:	10632271
Application Number:	10888285
Application Number:	10676046
Application Number:	10785672
Patent Number:	7114642
Patent Number:	7077856
Application Number:	11191851
Application Number:	11191665
Application Number:	11049631
Application Number:	11194950
Application Number:	11488369
Application Number:	11495920
Application Number:	11495011
Application Number:	11494999
Patent Number:	7537602
Application Number:	12235362
Application Number:	12235386
Application Number:	12313404

Application Number:	12352397
Application Number:	12430780
Application Number:	12472369
Application Number:	12499621

CORRESPONDENCE DATA

Fax Number: (203)492-8232

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

Phone: 203-492-8246

Email: lcharles@kenyon.com

Correspondent Name: THOMAS C. HUGHES

Address Line 1: TYCO HEALTHCARE GROUP LP

Address Line 2: 60 MIDDLETOWN AVENUE

Address Line 4: NORTH HAVEN, CONNECTICUT 06473

NAME OF SUBMITTER:

Clifford A. Ulrich

Total Attachments: 2

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CERTIFICATE OF MERGER

OF

POWER MEDICAL INTERVENTIONS, INC.

INTO

POWER MEDICAL INTERVENTIONS, LLC

Pursuant to Section 18-209 of the Limited Liability Company Act of the State of Delaware and Section 264 of the General Corporation Law of the State of Delaware

FIRST: The name and jurisdiction of formation or organization and domicile of each of the constituent entities is: Power Medical Interventions, LLC, a Delaware limited liability company (the "LLC"), and Power Medical Interventions, Inc., a Delaware corporation (the "Corporation").

SECOND: The Corporation and the LLC have entered into an Agreement of Merger, dated as of September 23, 2009 (the "Merger Agreement"), providing for the merger of the Corporation with and into the LLC pursuant to Section 18-209 of the Limited Liability Company Act of the State of Delaware (the "DLLCA") and Section 264 of the General Corporation Law of the State of Delaware (the "DGCL"). The Merger Agreement has been approved, adopted, certified, executed and acknowledged in accordance with Sections 18-204 and 18-209 of the DLLCA, in the case of the LLC, and Sections 103 and 264 of the DGCL, in the case of the Corporation.

THIRD: Power Medical Interventions, LLC shall be the surviving entity in the merger (the "Surviving LLC").

FOURTH: The Merger Agreement is on file at an office of the Surviving LLC at 15 Hampshire Street, Mansfield, MA 02048. A copy of the Merger Agreement will be furnished by the Surviving LLC, on request and without cost, to any member of the LLC or to any stockholder of the Corporation.

[SIGNATURE PAGE FOLLOWS]

IN WITNESS WHEREOF, the Surviving LLC has caused this Certificate of
Merger to be duly executed as of the 23rd day of September, 2009.

POWER MEDICAL INTERVENTIONS, LLC

By: /s/ Matthew J. Nicolella
Name: Matthew J. Nicolella
Title: Authorized Person