

PATENT ASSIGNMENT

Electronic Version v1.1

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SUBMISSION TYPE:	NEW ASSIGNMENT										
NATURE OF CONVEYANCE:	ASSIGNMENT										
CONVEYING PARTY DATA											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Name</th> <th style="width: 30%;">Execution Date</th> </tr> </thead> <tbody> <tr> <td>Yufeng Mo</td> <td>03/11/2010</td> </tr> <tr> <td>Tan Wang</td> <td>03/10/2010</td> </tr> <tr> <td>Zhaohua Liu</td> <td>03/11/2010</td> </tr> </tbody> </table>		Name	Execution Date	Yufeng Mo	03/11/2010	Tan Wang	03/10/2010	Zhaohua Liu	03/11/2010		
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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Name:</td> <td>Carestream Health, Inc.</td> </tr> <tr> <td>Street Address:</td> <td>150 Verona Street</td> </tr> <tr> <td>City:</td> <td>Rochester</td> </tr> <tr> <td>State/Country:</td> <td>NEW YORK</td> </tr> <tr> <td>Postal Code:</td> <td>14608</td> </tr> </table>		Name:	Carestream Health, Inc.	Street Address:	150 Verona Street	City:	Rochester	State/Country:	NEW YORK	Postal Code:	14608
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CORRESPONDENCE DATA											
Fax Number: (585)627-8919 <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i> Phone: 5856276716 Email: patent@carestreamhealth.com Correspondent Name: Carestream Health, Inc. Address Line 1: 150 Verona Street Address Line 4: Rochester, NEW YORK 14608											
ATTORNEY DOCKET NUMBER:	94896										
NAME OF SUBMITTER:	Maria Langschwager										
Total Attachments: 2 source=Assignment#page1.tif source=Assignment#page2.tif											

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PATENT
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ASSIGNMENT

For good and valuable consideration received, including salary or payment for the making of inventions, or employee benefits, I/we do hereby assign to Carestream Health, Inc., a Delaware corporation having a principal place of business in Rochester, New York, its successors and assigns, the entire right, title and interest, including priority rights, in and to all of my/our inventions and improvements disclosed in an application for patent for

AUTO-FOCUS INTRA-ORAL CAMERA HAVING A LINEAR PIEZOELECTRIC ACTUATOR

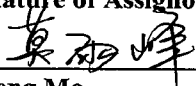
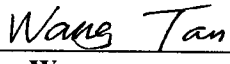
which is [check one]

☒	a non-provisional application for patent executed on the date(s) shown below by:
☐	a provisional application for patent by :
☐	an international application for patent by :

Assignor # 1: Yufeng Mo	Date 2010.03.11
Assignor # 2: Tan Wang	Date 2010.03.11
Assignor # 3: Zhaohua Liu	Date 2010.03.11

and [check one] ☒ about to be filed ☐ already filed as

in the United States Patent and Trademark Office, together with said application, and any corresponding or counterpart provisional or non-provisional application, and any divisional, continuation, substitute, reissue, re-examination application thereof, and any applications, including international applications, corresponding or being a counterpart thereto in whole or in part in the United States and all other countries. I/We do hereby acknowledge that I/we were subject to an obligation of assignment to Carestream Health, Inc. with respect to the entire right, title and interest in and to said inventions at the time the inventions were made. I/We also do hereby assign to Carestream Health, Inc. the entire right, title and interest in and to Letters Patent and similar protective rights granted on any of these applications, as well as the right to claim any applicable priority rights arising from any of these applications under the terms of any applicable conventions, treaties, statutes or regulations. I/We agree that any of these applications, at Carestream Health, Inc.'s sole discretion, may be filed and issued in the name of Carestream Health, Inc. or its designee. I/We agree to execute such documents which in the judgment of Carestream Health, Inc. may be necessary to obtain any such patents and similar protective rights and to maintain the title thereto in Carestream Health, Inc. or its designee. I/We further agree that, upon request, but without out-of-pocket expense to myself/ourselves, I/we shall furnish to Carestream Health, Inc. or its designee any data, information, exhibits, memoranda, or other evidence in my/our possession relating to any of said inventions or improvements and shall testify in any ex parte or inter partes legal or administrative proceedings relating thereto. I/We authorize and request issuance of all Letters Patent and similar protective rights that may be granted on any of these applications, to the extent that and in such manner as such issuance shall be requested by Carestream Health, Inc. or its designee. This document shall be governed, construed and interpreted in all respects in accordance with the laws of the State of New York, USA.

Signature of Assignor # 1  Yufeng Mo Date: 2010.3.11 Witnessed: Huikai Lu	Witness Address, if other than Carestream Health, Inc., Rochester, NY 14608 Building 4, XinJingiao Rd. 27# Pudong, Shanghai, P.R. China
Signature of Assignor # 2  Tan Wang Date: Mar. 10 / 2010 Witnessed: Huikai Lu	Witness Address, if other than Carestream Health, Inc., Rochester, NY 14608 Building 4, XinJingiao Rd. 27# Pudong, Shanghai, P.R. China

Signature of Assignor # 3

Liu Zhaohua

Zhaohua Liu

Date: 2010.3.11

Witnessed: Huikai Liu

Witness Address, if other than

Carestream Health, Inc., Rochester, NY 14608

Building 4, Xin Jingiao Rd 27#

Pudong, Shanghai, P.R. China