

PATENT ASSIGNMENT

Electronic Version v1.1

Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
FORSIGHT LABS, LLC.	04/26/2010
RECEIVING PARTY DATA	
Name:	TRANSCEND MEDICAL, INC.
Street Address:	127 Independence Dr.
City:	Menlo Park
State/Country:	CALIFORNIA
Postal Code:	94025-1114
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	11624168
CORRESPONDENCE DATA	
Fax Number:	(858)314-1501
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	8583141518
Email:	kteuk@mintz.com
Correspondent Name:	FRED C. HERNANDEZ
Address Line 1:	3580 Carmel Mountain Road, Suite 300
Address Line 4:	SAN DIEGO, CALIFORNIA 92130
ATTORNEY DOCKET NUMBER:	37630-502001US
NAME OF SUBMITTER:	FRED C. HERNANDEZ
Total Attachments: 6 source=11624168 Forsight Labs to Transcend Assignment#page1.tif source=11624168 Forsight Labs to Transcend Assignment#page2.tif source=11624168 Forsight Labs to Transcend Assignment#page3.tif source=11624168 Forsight Labs to Transcend Assignment#page4.tif source=11624168 Forsight Labs to Transcend Assignment#page5.tif	

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PATENT
REEL: 024363 FRAME: 0844

EXHIBIT A

ASSIGNMENT

For valuable consideration, we, **FORSIGHT LABS, LLC**, with offices at 191 Jefferson Drive, Menlo Park, California 94025-1114 ("the Assignor") hereby assign to **TRANSCEND MEDICAL, INC.**, with offices at 127 Independence Dr., Menlo Park, California 94025-1114, and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of any and all patent applications listed on the attached Schedule A, the assignment including said patent applications, and includes, without limitation, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions and improvements, and the right to claim priority based on the filing dates of said applications under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we agree for ourselves and our respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

The undersigned (whose title is supplied below) is empowered to act on behalf of the Assignee.

In witness whereof, Assignor has executed this Assignment.

Dated: APRIL 26, 2010

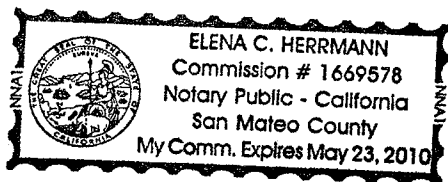
FORSIGHT LABS, LLC

(By: 
Name: K. Angela Macfarlane
Title: President & CEO

COUNTY OF SAN MATEO

On April 26, 2010, before me personally appeared, K. Angela Macfarlane, (or proved to me on the basis of satisfactory evidence) who by me duly sworn, said she is the President & CEO of ForSight Labs, LLC, and that pursuant to authority duly granted to him, he signed the foregoing instrument on behalf of ForSight Labs, LLC

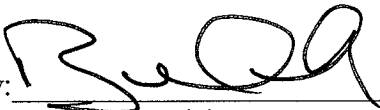
Notary Public



ASSIGNEE hereby acknowledges receipt of the entire right, title and interest in and to the PATENT APPLICATIONS.

Dated: 4/20/2010

TRANSCEND MEDICAL, INC.


By: 

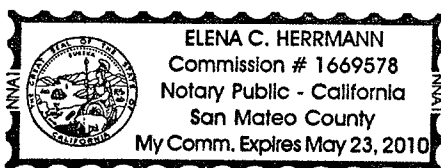
Name: Brian Walsh

Title: President & CEO

STATE OF CALIFORNIA)
) ss.:
COUNTY OF SAN MATEO)

On April 20, 2010, before me personally appeared, Brian Walsh, (or proved to me on the basis of satisfactory evidence) who by me duly sworn, said he is the President & CEO of Transcend Medical, Inc., and that pursuant to authority duly granted to him, he signed the foregoing instrument on behalf of Transcend Medical, Inc.


Notary Public



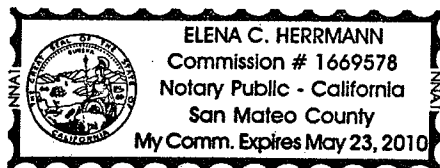
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of SAN MATEO

On April 20, 2010 before me, Elena C Herrmann, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared BRIAN WALSH
Name(s) of Signer(s)



who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: Elena C Herrmann
Signature of Notary Public

Place Notary Seal and/or Stamp Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: PATENT TRANSFER

Document Date: April 20, 2010 Number of Pages: 4

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____ Signer's Name: _____

☐ Corporate Officer — Title(s): _____ ☐ Corporate Officer — Title(s): _____

☐ Individual ☐ Individual

☐ Partner — ☐ Limited ☐ General ☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact ☐ Attorney in Fact

☐ Trustee ☐ Trustee

☐ Guardian or Conservator ☐ Guardian or Conservator

☐ Other: _____ ☐ Other: _____

Signer Is Representing: _____ Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here

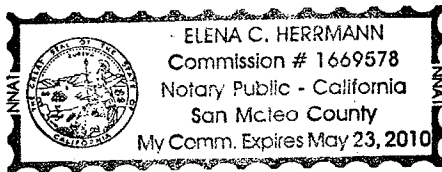
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of SAN MATEO

On April 26, 2010 before me, Elena C. Herrmann, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared K. Angela Macfarlane
Name(s) of Signer(s)



who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

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Signature: Elena C. Herrmann
Signature of Notary Public

Place Notary Seal and/or Stamp Above

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Document Date: April 26, 2010 Number of Pages: 4

Signer(s) Other Than Named Above: BRIAN WALSH

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____ Signer's Name: _____

☐ Corporate Officer — Title(s): _____ ☐ Corporate Officer — Title(s): _____

☐ Individual ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact ☐ Attorney in Fact

☐ Trustee ☐ Trustee

☐ Guardian or Conservator ☐ Guardian or Conservator

☐ Other: _____ ☐ Other: _____

Signer Is Representing: _____ Signer Is Representing: _____

Schedule A

Patent Applications:

Patent Application Title

Patent Application Serial No.

GLAUCOMA TREATMENT DEVICE	60/759,835
GLAUCOMA TREATMENT DEVICE	60/783,632
GLAUCOMA TREATMENT DEVICE	60/824,552
DRUG DELIVERY TREATMENT DEVICE	11/624,168
DRUG DELIVERY TREATMENT DEVICE	PCT/US2007/01269 (PCT)
DRUG DELIVERY TREATMENT DEVICE	2637602 (Canada)
DRUG DELIVERY TREATMENT DEVICE	07718113.9 (Europe)
DRUG DELIVERY TREATMENT DEVICE	2008551364 (Japan)