

Client Code: JUVA.UCC1

**RECORDATION FORM COVER SHEET
PATENTS ONLY**

To the Director, U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies): (List using letters or numbers for multiple parties) EVERA MEDICAL, INC. Additional name(s) of conveying party(ies) attached? () Yes (X) No	2. Name and address of receiving party(ies): Name: KNOBBE, MARTENS, OLSON & BEAR, LLP Internal Address: FOURTEENTH FLOOR Street Address: 2040 MAIN STREET City: IRVINE State: CA ZIP: 92614 Additional name(s) of receiving party(ies) attached? () Yes (X) No
3. Nature of conveyance: () Assignment () Security Agreement () Merger () Change of Name (X) Other: Security Interest Execution Date: (List as in section 1 if multiple signatures) MARCH 11, 2010	4. US or PCT Application number(s) or US Patent number(s): (X) Patent Application No.: 10/942728 Filing Date: 9/16/2004 Additional numbers attached? (X) Yes () No
5. Party to whom correspondence concerning document should be mailed: Customer No. 20,995 Address: Knobbe, Martens, Olson & Bear, LLP 2040 Main Street, 14th Floor Irvine, CA 92614 Return Fax: (949) 760-9502 Attorney's Docket No.: JUVA.UCC1	6. Total number of applications and patents involved: 13
7. Total fee (37 CFR 1.21(h)): \$520.00 (X) Authorized to be charged to deposit account	8. Deposit account number: 11-1410 Please charge this account for any additional fees which may be required, or credit any overpayment to this account.
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. <u>STEVEN J. NATAUPSKY</u> Name of Person Signing 37,688 Registration No.  Signature <u>5/6/10</u> Date Total number of pages including cover sheet, attachments and document: 5	

Documents transmitted via Facsimile to be recorded with required cover sheet information to:

Mail Stop Assignment Recordation Services
 Director, U.S. Patent and Trademark Office
 P.O. Box 1450
 Alexandria, VA 22313-1450
Facsimile Number: (571) 273-0140

RECORDPA

700436952

PATENT
REEL: 024390 FRAME: 0108

CH \$520.00 111410 10942310

All of debtor's intellectual property that is or has ever been the subject of secured party's representation and all files and records relating thereto, any recoveries from litigation involving such intellectual property, including, without limitation, any judgments, amounts paid in settlement, insurance proceeds and any awards of attorneys' fees and costs, and any other proceeds of such intellectual property, including, but not limited to, the property described below.

U.S. Patent & Patent Applications

Application No.	App. Filing Date	Patent No.	Issued Date	Title of Invention
		7244270	7/17/2007	SYSTEMS AND DEVICES FOR SOFT TISSUE AUGMENTATION
		7641688	1/5/2010	TISSUE AUGMENTATION DEVICE
10/942310	9/16/2004			METHODS FOR SOFT TISSUE AUGMENTATION
10/942317	9/16/2004			VALVED TISSUE AUGMENTATION IMPLANT
11/575493	5/5/2008			TISSUE AUGMENTATION DEVICE
12/242280	9/30/2008			MULTILAYER TISSUE IMPLANT HAVING A COMPLIANCE THAT SIMULATES TISSUE
12/242368	9/30/2008			TISSUE IMPLANT HAVING A BIASED LAYER AND COMPLIANCE THAT SIMULATES TISSUE
12/240906	9/29/2008			METHODS OF FORMING A MULTILAYER TISSUE IMPLANT HAVING A COMPLIANCE THAT SIMULATES TISSUE
12/241970	9/30/2008			METHODS OF FORMING A MULTILAYER TISSUE IMPLANT TO CREATE AN ACCORDION EFFECT ON THE OUTER LAYER
12/241818	9/30/2008			METHODS OF FORMING A TISSUE IMPLANT HAVING A TISSUE CONTACTING LAYER HELD UNDER COMPRESSION
12/024835	2/1/2008			BREAST IMPLANT WITH INTERNAL FLOW DAMPENING

PATENT

REEL: 024390 FRAME: 0109

<u>Case No.</u>	<u>Title of Invention:</u>	<u>Application No.</u>	<u>Filing Date:</u>	<u>Patent No:</u>	<u>Date Issued:</u>
JUVA.001A	SYSTEMS AND DEVICES FOR SOFT TISSUE AUGMENTATION	10/942728	9/16/2004	7244270	7/17/2007
JUVA.005CP1	TISSUE AUGMENTATION DEVICE	11/316215	12/22/2005	7641688	1/5/2010
JUVA.002A	METHODS FOR SOFT TISSUE AUGMENTATION	10/942310	9/16/2004		
JUVA.003A	VALVED TISSUE AUGMENTATION IMPLANT	10/942317	9/16/2004		
JUVA.005APC	TISSUE AUGMENTATION DEVICE	11/575493	5/5/2008		
JUVA.005CP1C1	MULTILAYER TISSUE IMPLANT HAVING A COMPLIANCE THAT SIMULATES TISSUE	12/242280	9/30/2008		
JUVA.005CP1C2	TISSUE IMPLANT HAVING A BIASED LAYER AND COMPLIANCE THAT SIMULATES TISSUE	12/242368	9/30/2008		
JUVA.005CP1C3	METHODS OF FORMING A MULTILAYER TISSUE IMPLANT HAVING A COMPLIANCE THAT SIMULATES TISSUE	12/240906	9/29/2008		
JUVA.005CP1C4	METHODS OF FORMING A MULTILAYER TISSUE IMPLANT TO CREATE AN ACCORDION EFFECT ON THE OUTER LAYER	12/241970	9/30/2008		
JUVA.005CP1C5	METHODS OF FORMING A TISSUE IMPLANT HAVING A TISSUE CONTACTING LAYER HELD UNDER COMPRESSION	12/241818	9/30/2008		
JUVA.011A	BREAST IMPLANT WITH INTERNAL FLOW DAMPENING	12/024835	2/1/2008		
JUVA.004A		10/942316	9/16/2004		
JUVA.001C1		11/778573	7/16/2007		

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

Mitchell Do

9497600404

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

KNOBBE, MARTENS, OLSON & BEAR, LLP

2040 MAIN STREET

14TH FLOOR

IRVINE CA 92614

DELAWARE DEPARTMENT OF STATE
 U.C.C. FILING SECTION
 FILED 06:38 PM 03/11/2010
 INITIAL FILING # 2010 0839047

SRV: 100272602

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

 1a. ORGANIZATION'S NAME
 EVERA MEDICAL, INC.

OR

1b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

1c. MAILING ADDRESS

1191 CHESS DR., SUITE G

CITY

FOSTER CITY

STATE

CA

POSTAL CODE

94404

COUNTRY

US

1e. TYPE OF ORGANIZATION

CORPORATION

1f. JURISDICTION OF ORGANIZATION

DE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

2e. TYPE OF ORGANIZATION

2f. JURISDICTION OF ORGANIZATION

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME

KNOBBE, MARTENS, OLSON & BEAR, LLP

OR

3b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c. MAILING ADDRESS

2040 MAIN ST., 14TH FLOOR

CITY

IRVINE

STATE

CA

POSTAL CODE

92614

COUNTRY

US

4. This FINANCING STATEMENT covers the following collateral:

Collateral Description - please see attachment

 6. ☐ This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional) ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2

8. OPTIONAL FILER REFERENCE DATA

JUVA - UCC1

All of debtor's intellectual property that is or has ever been the subject of secured party's representation and all files and records relating thereto, any recoveries from litigation involving such intellectual property, including, without limitation, any judgments, amounts paid in settlement, insurance proceeds and any awards of attorneys' fees and costs, and any other proceeds of such intellectual property, including, but not limited to, the property described below.

10/942316 9/16/2004

11/778573 7/16/2007

Non U.S. Patent & Patent Applications

Application No.	App. Filing Date	Country	Title of Invention
6845512	12/15/2006	EP	TISSUE AUGMENTATION DEVICE
P105153379	9/15/2005	BR	TISSUE AUGMENTATION DEVICE
2.00588E+11	9/15/2005	CN	TISSUE AUGMENTATION DEVICE
5797594.8	9/15/2005	EP	TISSUE AUGMENTATION DEVICE
8102044.4	9/15/2005	HK	TISSUE AUGMENTATION DEVICE
2007-532524	9/15/2005	JP	
10-2007-7006498	9/15/2005	KR	
MX/a/2007/002987	9/15/2005	MX	

Non Patent Co-operation Treaty Application

Application No.	App. Filing Date	Country	Title of Invention
PCT/US2009/032259	1/28/2009	WO	BREAST IMPLANT WITH INTERNAL FLOW DAMPENING