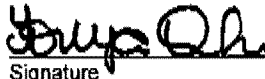


Substitute Form PTO-1595
 Attorney Docket No.: 20240-0026001
 Client's Ref. No.: RMD-INVD-600C

RECORDATION FORM COVER SHEET PATENTS ONLY

Commissioner for Patents: Please record the attached original document(s) or copy(ies).			
1. Name of conveying party(ies): <p style="text-align: center;">Doron Harlev and Brian Stewart</p> Additional name(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies): <p style="text-align: center;">Rhythmia Medical, Inc. 111 S. Bedford Street Suite 205 Burlington, MA 01803</p> Additional names/addresses attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other: Execution Date: 07/20/2011; 08/29/2011			
4. Application number(s) or patent number(s): If this document is being filed with a new application, the execution date of the application is: 07/14/2011 <table style="width: 100%;"> <tr> <td style="width: 50%;">A. Patent Application No(s): 13/182,825</td> <td style="width: 50%;">B: Patent No(s):</td> </tr> </table> Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		A. Patent Application No(s): 13/182,825	B: Patent No(s):
A. Patent Application No(s): 13/182,825	B: Patent No(s):		
5. Name/address of party to whom correspondence concerning document should be mailed: <p style="text-align: center;">TONYA S. DRAKE Fish & Richardson P.C. One Marina Park Drive Boston, Massachusetts 02210-1878</p>	6. Total number of applications/patents involved: 1 7. Total fee (37 CFR §3.41): \$40 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to charge Deposit Account. 8. Deposit Account No.: 06-1050 Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.		
DO NOT USE THIS SPACE			
9. Statement and Signature: <i>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.</i>			
Tonya S. Drake Reg. No. 57,861 Name of Person Signing	 Signature		
	8-31-11 Date		
Total number of pages including coversheet, attachments and document: 5 pages			

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CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile to the Patent and Trademark Office on the date indicated below.

August 31, 2011
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 Signature

Kristi A. Holmlund
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Attorney Docket No.: 20240-0026001 RMD-INVD-600C

ASSIGNMENT

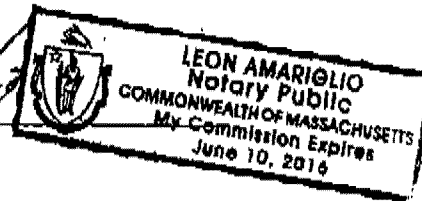
For valuable consideration, we, Doron Harley, of 99 Colchester Street, Brookline, MA 02446 and Brian Stewart, of 106 Lowell Road, Apt 201, North Reading, MA 01864, hereby assign to RHYTHMIA MEDICAL, INC., a corporation of Delaware, having a place of business at 111 S. Bedford Street, Suite 205, Burlington, MA 01803, 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 an application for United States Patent signed by us, entitled ELECTROANATOMICAL MAPPING, filed July 14, 2011, and assigned U.S. Serial Number 13/182,825, this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application 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 authorize the Assignee to apply in all countries in our name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; 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 further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

Attorney Docket No.: 20240-0026001 RMD-ENVD-600C

DATE: 7/20/11DORON HARLEVSTATE OF Massachusetts
COUNTY OF Middlesex) SS.

On 7/20/11, before me, the undersigned, a notary public for the State of Massachusetts, there personally appeared DORON HARLEV personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.

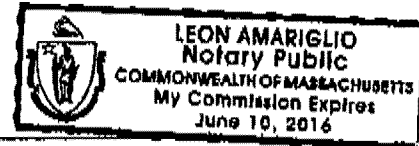
Leon Amarioglio
Notary Public

Attorney Docket No.: 20240-0026001 RMD-INVD-600C

DATE: 8/29/11Brian Stewart
BRIAN STEWARTSTATE OF Massachusetts
COUNTY OF Middlesex } SS.

On August 29, 2011, before me, the undersigned, a notary public for the State of Massachusetts, there personally appeared BRIAN STEWART personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.

Leon Amariglio
Notary Public

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Assignment Page 3 of 3