

PATENT ASSIGNMENT

Electronic Version v1.1
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT										
NATURE OF CONVEYANCE:	NUNC PRO TUNC ASSIGNMENT										
EFFECTIVE DATE:	06/10/2009										
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>Alexandre PRAT</td> <td>04/13/2011</td> </tr> <tr> <td>Romain CAYROL</td> <td>04/14/2011</td> </tr> <tr> <td>Nathalie ARBOUR</td> <td>04/19/2011</td> </tr> <tr> <td>Catherine LAROCHELLE</td> <td>06/10/2011</td> </tr> </tbody> </table>		Name	Execution Date	Alexandre PRAT	04/13/2011	Romain CAYROL	04/14/2011	Nathalie ARBOUR	04/19/2011	Catherine LAROCHELLE	06/10/2011
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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Name:</td> <td>CENTRE HOSPITALIER DE L'UNIVERSITE DE MONTREAL</td> </tr> <tr> <td>Street Address:</td> <td>3850 rue St-Urbain</td> </tr> <tr> <td>City:</td> <td>Montreal, Quebec</td> </tr> <tr> <td>State/Country:</td> <td>CANADA</td> </tr> <tr> <td>Postal Code:</td> <td>H2W 1T7</td> </tr> </table>		Name:	CENTRE HOSPITALIER DE L'UNIVERSITE DE MONTREAL	Street Address:	3850 rue St-Urbain	City:	Montreal, Quebec	State/Country:	CANADA	Postal Code:	H2W 1T7
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PROPERTY NUMBERS Total: 1											
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CORRESPONDENCE DATA											
Fax Number: (514)397-4382 <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i> Phone: (514)397-5119 Email: afovero@ggd.com Correspondent Name: GOUDREAU GAGE DUBUC Address Line 1: 2000 McGill College, Suite 2200 Address Line 4: Montreal, QUEBEC H3A 3H3											
ATTORNEY DOCKET NUMBER:	780/12810.319										
NAME OF SUBMITTER:	Anna Fovero										

CH \$40.00 12797055

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PATENT
REEL: 026849 FRAME: 0215

Total Attachments: 4

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PATENT

REEL: 026849 FRAME: 0216

ASSIGNMENT OF INVENTION

UNIVERSAL

WHEREAS, we, **Alexandre PRAT**, whose full post office address is 827 Outremont, Outremont, Québec H2V 3N5, Canada, **Romain CAYROL**, whose full post address is 5402 Jeanne-Mance, Montréal, H2V 4K4, Canada, **Nathalie ARBOUR**, whose full post office address is ^{1509 Lajoie Outremont} ~~2900 Beaudoin, Ville Saint-Laurent~~, ^{H2V 1R4} ~~H4K 2R5~~, Canada and **Catherine LAROCHELLE**, whose full post office address is 1101 Rachel est, apt 506, Montreal, H2J 2J7, Canada (hereinafter referred to as the "**Assignors**"), have invented and created an invention entitled "Ninjurin-1 and/or MCAM modulation and uses thereof" and described in United States provisional patent application number 61/185,707, filed on June 10, 2009, in United States patent application number 12/797,055, filed on June 9, 2010, in Canada patent application number 2,676,962, filed on August 25, 2009 and in Australia patent application number 2009-212,789, filed on August 25, 2009. We hereby authorize and request our patent agent to insert missing information above and information regarding any additional application covering the same invention when known here in parentheses

(Country _____, Application number _____, filed _____;
Country _____, Application number _____, filed _____;
Country _____, Application number _____, filed _____;
Country _____, Application number _____, filed _____;
Country _____, Application number _____, filed _____)

WHEREAS, **CENTRE HOSPITALIER DE L'UNIVERSITÉ DE MONTREAL**, 3850, rue St-Urbain, Montréal, Québec, Canada, H2W 1T7, (hereinafter referred to as the "**Assignee**") is desirous of acquiring Assignor's right, title and interest in and to said invention and in and to any and all patents to be obtained therefor;

NOW, THEREFORE, in consideration of One Dollar (\$1.00) and other valuable consideration, the receipt of which is hereby acknowledged, I have and by these presents do hereby sell, assign and transfer unto said Assignee, its successors and assigns, my entire right, title and interest in and to said invention, as described in the aforesaid application, in any form or embodiment thereof, and in and to the aforesaid application; and in and to any applications filed in any foreign country based thereon, including the right to file said foreign applications under the provisions of the International Convention;

also my entire right, title and interest in and to any and all patents, reissues or extensions thereof to be obtained in this or any foreign country upon said invention, and any divisional, continuation, continuation-in-part, substitute application(s) or supplementary disclosure(s) which may be filed upon said invention, in any country; and I hereby authorize and request the issuing authority to issue any and all patents on said application or applications to said Assignee.

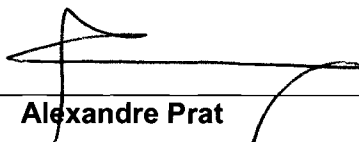
I further agree without any payment by said Assignee other than expenses incurred by the undersigned, to communicate to said Assignee, its representatives or agents, any facts relating to said invention, including evidence for interference purposes or for other proceedings, whenever requested; testify in any interference, litigation or other proceedings, whenever requested; and execute and deliver, on request, all lawful papers required to make any of the foregoing provisions effective, and likewise make these provisions binding upon my heirs, legal representatives, administrators and assigns.

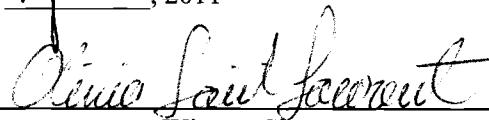
Les soussignés désirent que la présente cession d'invention soit rédigée en anglais. The undersigned request that the present Assignment of Invention be drafted in English.

IN WITNESS WHEREOF, each of the parties has signed this Assignment of Invention at the places and on the dates indicated below.

ASSIGNOR

Signed in Montreal, this 13 day of April, 2011

Per: 
Alexandre Prat


Witness Signature

OLIVIA SAINT-LAURENT
Witness Name (write in block letter)

Signed in Montreal, this 14 day of April, 2011

Per: Romain Cayrol
Romain Cayrol

Olivia Saint-Laurent
Witness Signature

OLIVIA SAINT-LAURENT
Witness Name (write in block letter)

Signed in Montreal, this 19 day of April, 2011

Per: Nathalie Arbour
Nathalie Arbour

Olivia Saint-Laurent
Witness Signature

OLIVIA SAINT-LAURENT
Witness Name (write in block letter)

Signed in Montreal, this 10 day of June, 2011

Per: Catherine Larochelle
Catherine Larochelle

Olivia Saint-Laurent
Witness Signature

OLIVIA SAINT-LAURENT
Witness Name (write in block letter)

ASSIGNEE

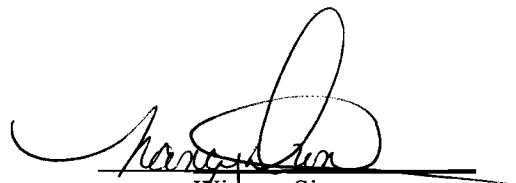
Signed in MONTREAL, this 19th day of JULY, 2011

CENTRE HOSPITALIER DE L'UNIVERSITÉ DE MONTRÉAL

Per:



Sylvain VILLIARD
Associate Executive Director




Witness Signature

Nancy Dion

Witness Name (write in block letter)

Per :



Jacques TURGEON
Research Director



Witness Signature

NATHALIE LEVESQUE

Witness Name (write in block letter)

The present Assignment is executed *nunc pro tunc* as of June 10, 2009 .