

PATENT ASSIGNMENT

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SUBMISSION TYPE:	NEW ASSIGNMENT										
NATURE OF CONVEYANCE:	NUNC PRO TUNC ASSIGNMENT										
EFFECTIVE DATE:	06/09/2009										
CONVEYING PARTY DATA											
<table border="1"> <thead> <tr> <th>Name</th> <th>Execution Date</th> </tr> </thead> <tbody> <tr> <td>Alexandre PRAT</td> <td>06/09/2011</td> </tr> <tr> <td>Simone TEROUZ</td> <td>04/12/2011</td> </tr> <tr> <td>Igal IFERGAN</td> <td>04/19/2011</td> </tr> <tr> <td>Hania KEBIR</td> <td>04/19/2011</td> </tr> </tbody> </table>		Name	Execution Date	Alexandre PRAT	06/09/2011	Simone TEROUZ	04/12/2011	Igal IFERGAN	04/19/2011	Hania KEBIR	04/19/2011
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Alexandre PRAT	06/09/2011										
Simone TEROUZ	04/12/2011										
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Hania KEBIR	04/19/2011										
RECEIVING PARTY DATA											
Name:	CENTRE HOSPITALIER DE L'UNIVERSITE DE MONTREAL										
Street Address:	3850 rue St-Urbain										
City:	Montreal, Quebec										
State/Country:	CANADA										
Postal Code:	H2W 1T7										
PROPERTY NUMBERS Total: 1											
<table border="1"> <thead> <tr> <th>Property Type</th> <th>Number</th> </tr> </thead> <tbody> <tr> <td>Application Number:</td> <td>12796221</td> </tr> </tbody> </table>		Property Type	Number	Application Number:	12796221						
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Application Number:	12796221										
CORRESPONDENCE DATA											
Fax Number:	(514)397-4382										
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>											
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ATTORNEY DOCKET NUMBER:	780/12810.318										
NAME OF SUBMITTER:	Anna Fovero										

CH \$40.00 12796221

501646765

PATENT
 REEL: 026849 FRAME: 0705

Total Attachments: 4

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ASSIGNMENT OF INVENTION

UNIVERSAL

WHEREAS, we, **Alexandre PRAT**, whose full post office address is 827 Outremont, Outremont, Québec H2V 3N5, Canada, **Simone TEROUZ**, whose full post office address is 200 Saint Aubin, Ville Saint Laurent H4M 2H9, Canada, **Igal IFERGAN**, whose full post office address is 435 Fraser, Ville Saint Laurent, H4M 1Y9, Canada, **Hania KEBIR**, whose full post address is ^{3977 AVENUE LACOMBE, MONTREAL} ~~2076 Sherbrooke Ouest app. 4,~~ ^{QUÉBEC H3T 1M7} ~~Montreal, H3H 1G5,~~ 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 61/185,420, filed on June 9, 2009, in United States patent application number 12/796,221, filed on June 8, 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 9 day of June, 2011

Per:


Alexandre Prat

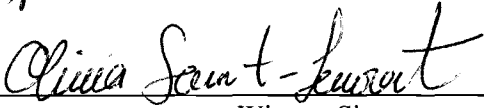

Witness Signature

OLIVIA SAINT-LAURENT

Witness Name (write in block letter)

Signed in Montreal, this 12 day of April, 2011

Per: 
Simone Terøuz


Witness Signature

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

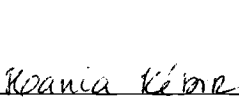
Signed in Montreal, this 19 day of April, 2011

Per: 
Iga Ifergan


Witness Signature

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

Signed in Montreal, this 11 day of May, 2011

Per: 
Hania Kebir


Witness Signature

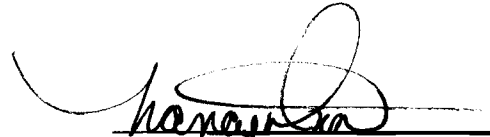
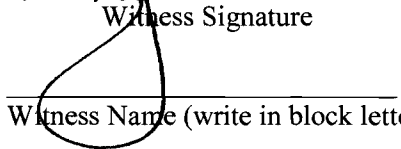
LYNE BOURBONNIERE
Witness Name (write in block letter)

ASSIGNEE

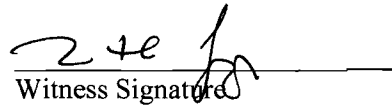
Signed in MONTREAL, this 19TH day of JULY, 2011

CENTRE HOSPITALIER DE L'UNIVERSITÉ DE MONTRÉAL

Per: 
Sylvain VILLIARD
Associate Executive Director


Witness Signature

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 9, 2009 .