

Commissioner of Patents & Trademarks

BOX ASSIGNMENTS

Washington, D.C. 20231

Form PTO-1595

RECORDATION FORM COVER SHEET

U.S. DEPARTMENT OF COMMERCE

(Rev. 03/01)

PATENTS ONLY

U.S. PATENT AND TRADEMARK OFFICE

To the honorable Commissioner of Patents and Trademarks: Please record the attached original document or copy thereof:

1. Name of Conveying Party(ies):**GUENTHER, Goetz****HAECKER, Juergen****KOEHLER, Markus****LAUER, Martin****MUELLER, Ralf****2. Name and Address of Receiving Party(ies):**Name: **Fresenius Medical Care Deutschland GmbH**Street Address: **Eise-Kroener-Strasse 1**

Street Address:

City: **Bad Homburg**State/Country: **Germany** Postal Code: **61352**Additional name(s) of conveying party(ies) attached? ☒ Yes ☐ NoAdditional name(s) and address attached? ☐ Yes ☒ No**3. Nature of Conveyance:**☒ Assignment☐ Change of Name☐ Security Agreement☐ Other:☐ MergerExecution Date: **05142010, 05172010, 05122010, 05142010, 05172010, 05172010, 06152010, 05202010****4. Application Number(s) or Patent Number(s):**☐ Assignment is being filed together with new application and the first execution date of application is :☒ Application has been filed already and the application filing date is: **03102010**

A. Patent Application Number(s):

12733592

B. Issued Patent Number(s):

Additional numbers attached? ☐ Yes ☒ No**5. Name and address of party to whom correspondence concerning this matter should be mailed:****CUSTOMER NUMBER 00136 -or-****JACOBSON HOLMAN PLLC
400 Seventh Street, N.W.
Washington, D.C. 20004-2218
Tel. 202-638-6666**Attorney Docket Number: **P73440US0****6. Total number of applications and patents involved:** **1****7. Total Fee (37 CFR 3.41): \$ 40.00**☒ Enclosed☒ Any deficiencies in enclosed fees are authorized to be charged to Deposit Account No. 06-1358.**DO NOT USE THIS SPACE****8. 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.***Harvey B. Jacobson, Jr. 20,851****September 12, 2011**

Name of Person Signing, Reg. No.

Signature

Date

Total number of pages including cover sheet, attachments, and documents:

16**PATENT**

Page 2 of 2
September 12, 2011
Atty. Docket no. P73440SU0
Serial no. 12/733,592

Additional names of conveying parties:

- 6) SCHNEIDER, Hans-Peter
- 7) WEBER, Tobias
- 8) WEIS, Manfred

UNITED STATES OF AMERICA - ASSIGNMENT

(1-5)	Insert <u>Name(s)</u> of Inventors	(1)	Goetz GUENTHER
		(2)	Juergen HAECKER
		(3)	Markus KOEHLER
		(4)	Martin LAUER
		(5)	Ralf MUELLER
			In consideration of the sum of one dollar (\$1.00), and other good and valuable considerations paid to each of the undersigned, the receipt and sufficiency of which are hereby acknowledged, the undersigned hereby assigns, transfers and sets over to
(6)	Insert <u>Name</u> of Assignee	(6)	Fresenius Medical Care Deutschland GmbH
(7)	Insert <u>Address</u> of Assignee	(7)	of Elze-Kroener-Strasse 1, 61352 Bad Homburg, Germany
(8)	Insert <u>Legal Entity and State or Country</u> (e.g., a corporation or citizen of Japan)	(8)	a Corporation of Germany
(9)	Insert <u>Identification</u> of Invention, such as Title, Case Number or Foreign Application Number	(9)	DEVICE AND METHOD FOR TREATING A MEDICAL FLUID AND MEDICAL CASSETTE
(10)	Insert <u>Date</u> of signing of Application, or filing date and Serial No., if known	(10)	Said application having been filed/executed on March 10, 2010 (and assigned Serial No. 12/733,592)

1) The undersigned agree(s) to execute all papers necessary in connection with this application and any continuing or divisional applications and also to execute separate assignments in connection with such applications as the Assignee may deem necessary or expedient.

2) The undersigned agree(s) to execute all papers necessary in connection with any interference which may be declared concerning this or any continuing or divisional applications thereof and to cooperate with the Assignee in every way possible in obtaining evidence and going forward with such interference.

3) The undersigned agree(s) to execute all papers and documents and perform any act which may be necessary in connection with claims provisions of the International Union for Protection of Industrial Property or similar agreements.

4) The undersigned agree(s) to perform all affirmative acts which may be necessary to obtain a grant of a valid United States patent to the

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6) Assignor hereby further assigns to Assignee all claims and causes of action for infringement of the patent rights assigned herein, including right to sue for, and collect damages for, any and all acts of past and future infringement.

7) The undersigned hereby grant(s) the law firm of Jacobson Holman PLLC, 400 Seventh Street, N.W., Washington, D.C. 20004, the power to insert on this assignment any further identification which may be necessary or desirable in order to comply with the rules of the United States Patent and Trademark Office for recordation of this document.

In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Date	7.14.05.10	Name of Inventor	Goetz GUENTHER	typed name		signature	(SEAL)
Date		Name of Inventor	Juergen HAECKER	typed name		signature	(SEAL)
Date		Name of Inventor	Markus KOEHLER	typed name		signature	(SEAL)
Date		Name of Inventor	Martin LAUER	typed name		signature	(SEAL)
Date		Name of Inventor	Ralf MUELLER	typed name		signature	(SEAL)

This assignment should preferably be signed before a United States Consul if signed abroad, or a Notary Public if domestically signed. If not, then the execution by the inventor(s) should be witnessed by at least two witnesses who sign here:

☒ Additional inventor's names and signatures on a separate sheet.

Witness

Witness

LAW OFFICES OF
JACOBSON HOLMAN
PROFESSIONAL LIMITED LIABILITY COMPANY
THE JENIFER BUILDING
400 SEVENTH STREET, N.W.
WASHINGTON, D.C. 20004

03903-094/3

ADDED PAGE TO ASSIGNMENT FOR SIGNING BY ADMINISTRATOR(TRIX),
EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE ON BEHALF OF DECEASED OR
INCAPACITATED INVENTOR (37 CFR 1.42 AND 1.43)

I, Andrea Guenther, Richard Robert Bernd Günther and Gesa
(type or print name(s) of administrator(trix), executor(trix), legal representative or all heirs) Dagmar Günther
hereby declare that I am a citizen of Germany
residing at Steinstrasse 15, 61440 Oberursel, Germany
Theodor-Veiel-Strasse 101, 70374 Stuttgart

and that I am executing and signing the declaration to which this is attached as (check
one):

- ☐ the administrator(trix) of
☐ executor(trix) of the last will and testament of
☒ legal representative (or heirs) of

Goetz Guenther

Full name of (first, second etc.) deceased or incapacitated inventor
Germany

Country of citizenship of deceased or incapacitated inventor
Landgrafenstrasse 56, Bad Homburg, Germany 61350

Residence of deceased or incapacitated inventor

Post Office Address of deceased or incapacitated inventor

NOTE: The name of the first, second etc. deceased or incapacitated inventor should preferably also be filled
in at the appropriate prior space of the assignment adding the words "deceased-completed on added
page" or "incapacitated-completed on added page."

That, upon information and belief, I aver those facts which the inventor is required to
state.

Date: 17.05.2010

[Signature]

(Signature of administrator(trix), executor(trix)
legal representative (or all heirs))

05903.09 2/9

UNITED STATES OF AMERICA - ASSIGNMENT

(1-5) Insert Name(s) of Inventors(1) Goetz GUENTHER(2) Juergen HAECKER(3) Markus KOEHLER(4) Martin LAUER(5) Ralf MUELLER and

In consideration of the sum of one dollar (\$1.00), and other good and valuable considerations paid to each of the undersigned, the receipt and sufficiency of which are hereby acknowledged, the undersigned hereby assigns, transfers and sets over to

(6) Insert Name of Assignee(6) Fresenius Medical Care Deutschland GmbH(7) Insert Address of Assignee(7) of Else-Kroener-Strasse 1, 61352 Bad Homburg, Germany(8) Insert Legal Entity and State or Country (e.g., a corporation or citizen of Japan)(8) a Corporation of Germany

(hereinafter designated as the Assignee) the entire right, title and interest for the United States, its territories, dependencies and possessions, in the invention known as

(9) Insert Identification of Invention, such as Title, Case Number or Foreign Application Number(9) DEVICE AND METHOD FOR TREATING A MEDICAL FLUID AND MEDICAL CASSETTE(10) Insert Date of signing of Application, or filing date and Serial No., if known

for which the undersigned has (have) executed an application for patent in the United States of Said application having been filed/executed on March 10, 2010 (and assigned Serial No. 121733, 592)

1) The undersigned agree(s) to execute all papers necessary in connection with this application and any continuing or divisional applications and also to execute separate assignments in connection with such applications as the Assignee may deem necessary or expedient.

2) The undersigned agree(s) to execute all papers necessary in connection with any interference which may be declared concerning this or any continuing or divisional applications thereof and to cooperate with the Assignee in every way possible in obtaining evidence and going forward with such interference.

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In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Date <u>7.14.05.10</u>	Name of Inventor <u>Goetz GUENTHER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature
Date <u>[Signature]</u>	Name of Inventor <u>Juergen HAECKER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature
Date <u>[Signature]</u>	Name of Inventor <u>Markus KOEHLER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature
Date <u>[Signature]</u>	Name of Inventor <u>Martin LAUER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature
Date <u>[Signature]</u>	Name of Inventor <u>Ralf MUELLER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature

This assignment should preferably be signed before a United States Consul if signed abroad, or a Notary Public if domestically signed. If not, then the execution by the inventor(s) should be witnessed by at least two witnesses who sign here:

☒ Additional inventor's names and signatures on a separate sheet.

Witness

Witness

LAW OFFICES OF
JACOBSON HOLMAN
 PROFESSIONAL LIMITED LIABILITY COMPANY
 THE JENIFER BUILDING
 400 SEVENTH STREET, N.W.
 WASHINGTON, D.C. 20004

03903-0949

ADDED PAGE TO ASSIGNMENT FOR SIGNING BY ADMINISTRATOR(TRIX),
EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE ON BEHALF OF DECEASED OR
INCAPACITATED INVENTOR (37 CFR 1.42 AND 1.43)

I, Andrea Guenther, Richard Robert Bernd Günther and Gesa
(type or print name(s) of administrator(trix), executor(trix), legal representative or all heirs) Dagmar Günther
hereby declare that I am a citizen of Germany
residing at Steinstrasse 15, 61440 Oberursel, Germany
Theodor-Heide-Strasse 101, 70374 Stuttgart

and that I am executing and signing the declaration to which this is attached as (check
one):

- ☐ the administrator(trix) of
☐ executor(trix) of the last will and testament of
☒ legal representative (or heirs) of

Goetz Guenther

Full name of (first, second etc.) deceased or incapacitated inventor
Germany

Country of citizenship of deceased or incapacitated inventor
Landgrafenstrasse 56, Bad Homburg, Germany 61350

Residence of deceased or incapacitated inventor

Post Office Address of deceased or incapacitated inventor

NOTE: The name of the first, second etc. deceased or incapacitated inventor should preferably also be filled
in at the appropriate prior space of the assignment adding the words "deceased-completed on added
page" or "incapacitated-completed on added page."

That, upon information and belief, I aver those facts which the inventor is required to
state

Date: 14.05.2010

Günter
(Signature of administrator(trix), executor(trix)
legal representative (or all heirs))

03903.0949

UNITED STATES OF AMERICA - ASSIGNMENT

(1-5) Insert Name(s) of Inventors

- (1) Goetz GUENTHER
- (2) Juergen HAECKER
- (3) Markus KOEHLER
- (4) Martin LAUER
- (5) Ralf MUELLER and

In consideration of the sum of one dollar (\$1.00), and other good and valuable considerations paid to each of the undersigned, the receipt and sufficiency of which are hereby acknowledged, the undersigned hereby assigns, transfers and sets over to

(6) Insert Name of Assignee(6) Fresenius Medical Care Deutschland GmbH(7) Insert Address of Assignee(7) of Else-Kroener-Strasse 1, 61352 Bad Homburg, Germany(8) Insert Legal Entity and State or Country (e.g., a corporation or citizen of Japan)(8) a Corporation of Germany (hereinafter designated as the Assignee) the entire right, title and interest for the United States, its territories, dependencies and possessions, in the invention known as(9) Insert Identification of Invention, such as Title, Case Number or Foreign Application Number(9) DEVICE AND METHOD FOR TREATING A MEDICAL FLUID AND MEDICAL CASSETTE(10) Insert Date of signing of Application, or filing date and Serial No., if known(10) Said application having been filed/executed on March 10, 2010 (and assigned Serial No. 12/733,592)

1) The undersigned agree(s) to execute all papers necessary in connection with this application and any continuing or divisional applications and also to execute separate assignments in connection with such applications as the Assignee may deem necessary or expedient.

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In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Date <u>7/12/05</u>	Name of Inventor <u>Goetz GUENTHER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature
Date <u>7/12/05</u>	Name of Inventor <u>Juergen HAECKER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature
Date <u>7/12/05</u>	Name of Inventor <u>Markus KOEHLER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature
Date <u>7/12/05</u>	Name of Inventor <u>Martin LAUER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature
Date <u>7/12/05</u>	Name of Inventor <u>Ralf MUELLER</u>	<u>[Signature]</u> (SEAL)
	typed name	signature

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☒ Additional inventor's names and signatures on a separate sheet.

Witness

Witness

LAW OFFICES OF
JACOBSON HOLMAN
 PROFESSIONAL LIMITED LIABILITY COMPANY
 THE JENIFER BUILDING
 400 SEVENTH STREET, N.W.
 WASHINGTON, D.C. 20004

JH 5/01 (Copying without deletions permitted)

03903 09 4/3

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Andrea Guenther, Richard Robert Bernd Günther and Gesa

(type or print name(s) of administrator(trix), executor(trix), legal representative or all heirs)

Dagmar Günther

hereby declare that I am a citizen of Germany

residing at Steinstrasse 15, 61440 Oberursel, Germany

Theodor-Veiel-Strasse 101, 70374 Stuttgart

and that I am executing and signing the declaration to which this is attached as (check one):

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☐ executor(trix) of the last will and testament of
☒ legal representative (or heirs) of

Goetz Guenther

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Germany

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Date: 14.05.2010

J. Guenther

(Signature of administrator(trix), executor(trix)
legal representative (or all heirs))

03903.094/9

UNITED STATES OF AMERICA - ASSIGNMENT

(1-5) Insert Name(s) of Inventors

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(hereinafter designated as the Assignee) the entire right, title and interest for the United States, its territories, dependences and possessions, in the invention known as(9) Insert Identification of Invention, such as Title, Case Number or Foreign Application Number(9) DEVICE AND METHOD FOR TREATING A MEDICAL FLUID AND MEDICAL CASSETTE(10) Insert Date of signing of Application, or filing date and Serial No., if known(10) Said application having been filed/executed on March 10, 2010 (and assigned Serial No. 12/733,592)

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In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Date <u>7</u>	Name of Inventor <u>Goetz GUENTHER</u>	typed name	signature	(SEAL)
Date <u>12.5.2010</u>	Name of Inventor <u>Juergen HAECKER</u>	typed name	signature	(SEAL)
Date <u>7</u>	Name of Inventor <u>Markus KOEHLER</u>	typed name	signature	(SEAL)
Date <u>7</u>	Name of Inventor <u>Martin LAUER</u>	typed name	signature	(SEAL)
Date <u>7</u>	Name of Inventor <u>Ralf MUELLER</u>	typed name	signature	(SEAL)

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☒ Additional Inventor's names and signatures on a separate sheet.

Witness

Witness

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PROFESSIONAL LIMITED LIABILITY COMPANY
THE JENIFER BUILDING
400 SEVENTH STREET, N.W.
WASHINGTON, D.C. 20004

03903.074/9

UNITED STATES OF AMERICA - ASSIGNMENT

(1-5) Insert Name(s) of Inventors

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	typed name	signature	
Date <u>7</u>	Name of Inventor <u>Juergen HAECKER</u>	<u>[Signature]</u>	(SEAL)
	typed name	signature	
Date <u>12.05.10</u>	Name of Inventor <u>Markus KOEHLER</u>	<u>[Signature]</u>	(SEAL)
	typed name	signature	
Date <u>7</u>	Name of Inventor <u>Martin LAUER</u>	<u>[Signature]</u>	(SEAL)
	typed name	signature	
Date <u>7</u>	Name of Inventor <u>Ralf MUELLER</u>	<u>[Signature]</u>	(SEAL)
	typed name	signature	

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JH 5/01 (Copying without deletions permitted)

03903.09 4/9

UNITED STATES OF AMERICA - ASSIGNMENT

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(6) Fresenius Medical Care Deutschland GmbH

(7) Insert Address of Assignee

(7) of Else-Kroener-Strasse 1, 61352 Bad Homburg, Germany

(8) Insert Legal Entity and State or Country (e.g., a corporation or citizen of Japan)

(8) a Corporation of Germany
(hereinafter designated as the Assignee) the entire right, title and interest for the United States, its territories, dependencies and possessions, in the invention known as

(9) Insert Identification of Invention, such as Title, Case Number or Foreign Application Number

(9) DEVICE AND METHOD FOR TREATING A MEDICAL FLUID AND MEDICAL CASSETTE

(10) Insert Date of signing of Application, or filing date and Serial No., if known

(10) Said application having been filed/executed on March 10, 2010 (and assigned Serial No. 12/733,592)

1) The undersigned agree(s) to execute all papers necessary in connection with this application and any continuing or divisional applications and also to execute separate assignments in connection with such applications as the Assignee may deem necessary or expedient.

2) The undersigned agree(s) to execute all papers necessary in connection with any interference which may be declared concerning this or any continuing or divisional applications thereof and to cooperate with the Assignee in every way possible in obtaining evidence and going forward with such Interference.

3) The undersigned agree(s) to execute all papers and documents and perform any act which may be necessary in connection with claims provisions of the International Union for Protection of Industrial Property or similar agreements.

4) The undersigned agree(s) to perform all affirmative acts which may be necessary to obtain a grant of a valid United States patent to the

5) The undersigned hereby authorize(s) and request(s) the Commissioner of Patents and Trademarks to issue any and all Letters Patents United States resulting from this application or any continuing or divisional applications thereof to the said Assignee, as Assignee of the entire interest, and hereby covenants that he has (they have) full right to convey the entire interest herein assigned, and that he has (they have) not executed, and will not execute any agreement in conflict herewith.

6) Assignor hereby further assigns to Assignee all claims and causes of action for infringement of the patent rights assigned herein, including right to sue for, and collect damages for, any and all acts of past and future infringement.

7) The undersigned hereby grant(s) the law firm of Jacobson Holman PLLC, 400 Seventh Street, N.W., Washington, D.C. 20004, the power to insert on this assignment any further identification which may be necessary or desirable in order to comply with the rules of the United States Patent and Trademark Office for recordation of this document.

In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Date <u>7/4/10</u>	Name of Inventor <u>Goetz GUENTHER</u>	<u>[Signature]</u>	(SEAL)
Date <u>7/4/10</u>	Name of Inventor <u>Juergen HAECKER</u>	<u>[Signature]</u>	(SEAL)
Date <u>7/4/10</u>	Name of Inventor <u>Markus KOEHLER</u>	<u>[Signature]</u>	(SEAL)
Date <u>7/4/10</u>	Name of Inventor <u>Martin LAUER</u>	<u>[Signature]</u>	(SEAL)
Date <u>7/4/10</u>	Name of Inventor <u>Ralf MUELLER</u>	<u>[Signature]</u>	(SEAL)

This assignment should preferably be signed before a United States Consul if signed abroad, or a Notary Public if domestically signed. If not, then the execution by the Inventor(s) should be witnessed by at least two witnesses who sign here:

☒ Additional inventor's names and signatures on a separate sheet.

Witness

Witness

LAW OFFICES OF
JACOBSON HOLMAN
PROFESSIONAL LIMITED LIABILITY COMPANY
THE JENIFER BUILDING
400 SEVENTH STREET, N.W.,
WASHINGTON, D.C. 20004

03903.094/9

UNITED STATES OF AMERICA - ASSIGNMENT

(1-5) Insert Name(s) of Inventors

- (1) Goetz GUENTHER
- (2) Juergen HAECKER
- (3) Markus KOEHLER
- (4) Martin LAUER
- (5) Ralf MUELLER and

In consideration of the sum of one dollar (\$1.00), and other good and valuable considerations paid to each of the undersigned, the receipt and sufficiency of which are hereby acknowledged, the undersigned hereby assigns, transfers and sets over to

(6) Insert Name of Assignee(6) Fresenius Medical Care Deutschland GmbH(7) Insert Address of Assignee(7) of Else-Kroener-Strasse 1, 61352 Bad Homburg, Germany(8) Insert Legal Entity and State or Country (e.g., a corporation or citizen of Japan)(8) a Corporation of Germany (hereinafter designated as the Assignee) the entire right, title and interest for the United States, its territories, dependencies and possessions, in the invention known as(9) Insert Identification of Invention, such as Title, Case Number or Foreign Application Number(9) DEVICE AND METHOD FOR TREATING A MEDICAL FLUID AND MEDICAL CASSETTE(10) Insert Date of signing of Application, or filing date and Serial No., if known(10) Said application having been filed/executed on March 10, 2010 (and assigned Serial No. 12/733,592)

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In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

Date	<u>[Signature]</u>	Name of Inventor	<u>Goetz GUENTHER</u>	<u>[Signature]</u>	(SEAL)
			typed name	signature	
Date	<u>[Signature]</u>	Name of Inventor	<u>Juergen HAECKER</u>	<u>[Signature]</u>	(SEAL)
			typed name	signature	
Date	<u>[Signature]</u>	Name of Inventor	<u>Markus KOEHLER</u>	<u>[Signature]</u>	(SEAL)
			typed name	signature	
Date	<u>[Signature]</u>	Name of Inventor	<u>Martin LAUER</u>	<u>[Signature]</u>	(SEAL)
			typed name	signature	
Date	<u>17.05.2010</u>	Name of Inventor	<u>Ralf MUELLER</u>	<u>[Signature]</u>	(SEAL)
			typed name	signature	

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☒ Additional inventor's names and signatures on a separate sheet.

Witness

Witness

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 PROFESSIONAL LIMITED LIABILITY COMPANY
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 400 SEVENTH STREET, N.W.
 WASHINGTON, D.C. 20004

UNITED STATES OF AMERICA - ASSIGNMENT
Separate Sheet For Additional Inventors

The following are inventors whose names would not fit on the Assignment form for the application executed/ filed on March 10, 2010 (and assigned serial No. 12/733,592)

Names of Additional Inventors

- (6) Hans-Peter SCHNEIDER
- (7) Tobias WEBER
- (8) Manfred WEIS
- (9) _____
- (10) _____
- (11) _____
- (12) _____

In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s)

Date <u>03.05.2010</u>	Name of Inventor <u>Hans-Peter SCHNEIDER</u>	<u>[Signature]</u> (SEAL)
Date <u>X</u>	Name of Inventor <u>Tobias WEBER</u>	<u>[Signature]</u> (SEAL)
Date <u>X</u>	Name of Inventor <u>Manfred WEIS</u>	<u>[Signature]</u> (SEAL)
Date _____	Name of Inventor _____	_____ (SEAL)
Date _____	Name of Inventor _____	_____ (SEAL)
Date _____	Name of Inventor _____	_____ (SEAL)
Date _____	Name of Inventor _____	_____ (SEAL)
Date _____	Name of Inventor _____	_____ (SEAL)

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Witness [Signature]
Witness [Signature]

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- (9) _____
- (10) _____
- (11) _____
- (12) _____

In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).			
Date <u>15.06.2010</u>	Name of Inventor <u>Hans-Peter SCHNEIDER</u>	<u>[Signature]</u>	(SEAL)
	typed name	signature	
Date <u>15.06.2010</u>	Name of Inventor <u>Tobias WEBER</u>	<u>[Signature]</u>	(SEAL)
	typed name	signature	
Date _____	Name of Inventor <u>Manfred WEIS</u>	<u>[Signature]</u>	(SEAL)
	typed name	signature	
Date _____	Name of Inventor _____	signature	(SEAL)
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Date _____	Name of Inventor _____	signature	(SEAL)
	typed name	signature	

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- (8) **Manfred WEIS**
- (9)
- (10)
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- (12)

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[illegible]

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