Ass Dir	il Stop: ignment Recordation Services ector of the U.S. Patent and Trademark Office ). Box 1450	RECORDATION FORM PATENTS (	
Ale	xandria, VA 22313-1450	_	Attorney Docket No. 149762
	ase record the attached document.	et, attachments, and docume	nent: <u>3</u>
3.	A. Name of conveying parties:  1. Steven L. MAYER 2. Brendan RENS  B. Additional name(s) of conveying  A. Nature of conveyance:  Assignment  Security Agreement  Other  B. Execution Date: [1]: SEPTI [2]: SEPTEMBER 14, 201	y party(ies) attached?  ☐ Yes ☑ No  Merger  Change of Name	<ul> <li>2. A. Name and address of receiving party:  I.D. THERAPEUTICS LLC 27709 SILVER LAKE ROAD, SALEM, WI 53168</li> <li>B. Additional name(s) &amp; address(es) attached?  □Yes ☒ No</li> </ul>
4.	A. Patent Application No. 29	9/402,179	B. Patent No.(s)
		Additional numbers attack	
	C. Title of Application: CAPS	SULE FOR MEDI	ICATION BOTTLE
5.	Name and address of party to whom concerning document should be mailed		6. Total number of applications and patents involved: 1
	Name: William P. Berridge		7. Please charge Deposit Account No. 15-0461 the total fee (37 CFR 3.41) in the amount of \$40.00.
	Address: OLIFF & BERRIDGE P.O. Box 320850 Alexandria, VA 22320 Phone Number: 703-83 Fax Number: 703-836	) 0-4850 66-6400	Credit any overpayment or charge any underpayment to deposit account number 15-0461.
9.	Statement and signature. To the best of my knowledge and belie original document.  William P Berridge, Registration No. Justin T. Lingard, Registration No. 61	30,024	ion is true and correct and any attached copy is a true copy of the  Date: September 21, 2011

PATENT REEL: 026981 FRAME: 0684

				WORLDWIDE A	SSIGNMENT		
(1.6)	F	(1)	Steven I	MAYER	(5)		
(1-8)	Insert Name(s)	(2)	Brendan	RENS			
	of Inventor(s)	(3)			(7)		
		(4)			(8)		
		each	In consider of the under	cration of the sum of or	e dollar (\$1.00) and other good and valu sufficiency of which are hereby acknow	able consideration paid to	
<i>(</i> <b>1</b> )		agree	s to assign	and hereby does assign	t, transfer and set over to	reaged, each undersigned	
(9)	Insert Name of Assignee	(9)	I.D.	THERAPEUTICS	LLC		
(16)	Insert Address of Assignee	(10)	2770	9 SILVER LAKE	DAAD	<del>*************************************</del>	
	·		SAL	EM, WI 53168			
		(here the er	inafter des	gnated as the Assignee	and Assignee's heirs, successors, assign United States of America as defined in 3	s and legal representatives,	
		omer	countries:	in the invention; in all	applications for patent or similar rights of	n the invention said	
		conm	rmation, si	ibstitute and reissue app	sional, non-provisional, divisional, conti- lication(s), including any application(s) i	Fled in one country bacad	
		unere(	on, and ind	luding the right to file f	oreign applications under the provisions of certificates, utility models, confirmation	of any treaty or consension.	
		reexa	mination o	ertificates that may be g	ranted in the U.S. and in all other countri	ies on the invention, known	
(11)	Insert	(11)	Capsul	for Medication Bottle			
	Identification, such as Title, Case					,	
	Number or Foreign Application Number	(Atto	rney Doct				
	Parameter 1 - entre 10-0	-	(Attorney Docket No. 149762 ).  For which the undersigned has (have) executed an application for patent in the United States of America on				
(12)	Insert Date of	even (	date herew	ith or		MANUSCON PRINCIPATION	
(12)	Signing of	(12)	on _				
	Application					***************************************	
(13)	Alternative Identification	(13)	U.S. App	ication Serial Number	29/402,179		
	for filed applications			September 2	1 2011	<del></del>	
		filed			· , 4011		
	1) Each undersigned agr	ces to exe	cute all pe	pers necessary in conne	ction with any application and/or grant fo	or the invention and also to	
	<ol><li>Each undersigned agr</li></ol>	ees to exe	cute all pa	pers necessary in conne	as the Assignee may deem necessary. ction with any interference which may be	e declared concerning any	
applica interfer	tion or grant for the invent	ion and to	соореган	with the Assignee in ev	ery way possible in obtaining evidence	and going forward with such	
	3) Each undersigned agn	ees to exe	cute all pa	pers and documents and	perform any act which may be necessar	y in connection with claims	
or prov	isions of the International	Convention	on for Prot	ection of Industrial Prop	erty or similar agreements. y be necessary to obtain, maintain or cor		
Assign	ee in the United States and	any other	r country ju	which the Assignee m	ry file a patent application(s).	_	
issue a	5) Each undersigned autl ny and all grants resulting f	norizes an	nd requests	the Commissioner of the	e U.S. Patent and Trademark Office and as Assignee of the entire interest, and co	other issuing anthorities to	
nght to	convey the entire interest	herein ass	signed, and	that he has not execute	i, and will not execute, any agreement(s)	in conflict herewith, and	
agrees 1	that this assignment is bind 6) Each undersigned here	ing on his	m and his l	teirs, successors, assign of Olive & Reprince	s and legal representatives. LC the power to insert on this assignmen		
that ma	ly be necessary or desirable	in order	to comply	with the rules of any iss	uing authority, including the United State	es Patent and Trademark	
Office,	for recordation of this doc						
		_	1	ned on the date(s) oppos	ite the undersigned name(s).	A Commence of the Commence of	
Date	ZI Sept	201	<u>/</u>  1	aventor Signature	Mr. Mars	(SEAL)	
Date	-		,	nventor Signature	State of Wisionisia U County of Kenosha		
Date				nventor Signature	Signed before me on	100 mm	
Date			I	nventor Signature		Tallach Miss	
	This assignment should no	referably		<del>-</del>	lic if within the U.S.A. (b) a U.S. Consul	Notary Public	
ncither,	then it should be signed be	fore at le	ast two wi	tnesses who also sign he	re:	n outside the U.S.A. If	
Date				Witness			
					PA	IENI	

**REEL: 026981 FRAME: 0685** 

(1-8)	Insert	(1)	Steven L. MAYER	(5)
1-0)	Name(s)	(2)	Brendan RENS	(6)
	of Inventor(s)			
		(,,		one dollar (\$1.00) and other good and valuable consideration paid to
		cach	of the undersigned, the receipt ar	id sufficiency of which are hereby acknowledged, each understand
)	Insert Name of		s to assign, and hereby does assign.  I.D. THERAPEUTICS	
٥.	Assignee	(9)	I.D. THERAFEUTICS	S CLC
6)	Insert Address of Assignee	(10)	27709 SILVER LAKE SALEM, WI 53168	ROAD
1)	Insert Identification,	count include substi include grants	right, title and interest for the Uries: in the invention; in all appling any and all provisional, nontute and reissue application(s), it ing the right to file foreign application as Letters Patent, certification.	e) and Assignce's heirs, successors, assigns and legal representatives, nited States of America as defined in 35 U.S.C. §100 and for all othe ications for patent or similar rights on the invention, said application-provisional, divisional, continuation, international, confirmation, icluding any application(s) filed in any country based thereon, and cations under the provisions of any treaty or convention; and in all tes, utility models, confirmations, extensions, reissues and granted in the U.S. and in all other countries on the invention, know.
	such as Title, Case			
	Number or Foreign Application Number	(Atto:	rney Docket No. 149762	).
		-	nich the undersigned has (have) e	xecuted an application for patent in the United States of America on
		even d	late herewith or	on approach to packet in the Critical States of America on
!)	Insert Date of Signing of	(12)	on	
	Application			
3)	Application Alternative Identification	(13)	U.S. Application Serial Number	29/402 179
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**PATENT** 

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Witness