

PATENT ASSIGNMENT

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Daniel Rae Robinson	12/05/2011
RECEIVING PARTY DATA	
Name:	Pioneer Surgical Technology, Inc.
Street Address:	375 River Park Circle
City:	Marquette
State/Country:	MICHIGAN
Postal Code:	49855
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	13272931
CORRESPONDENCE DATA	
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<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>	
Correspondent Name:	Stephen S. Favakeh
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Address Line 4:	Chicago, ILLINOIS 60603
ATTORNEY DOCKET NUMBER:	7115-100668-US
NAME OF SUBMITTER:	Stephen S. Favakeh
Total Attachments: 2 source=Executed assignment#page1.tif source=Executed assignment#page2.tif	

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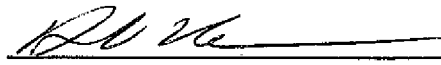
ASSIGNMENT

I, **Daniel Rae Robinson**, of Marquette, County of Marquette and State of Michigan, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to PIONEER SURGICAL TECHNOLOGY, INC., a Michigan corporation, having its principal place of business at 375 River Park Circle, Marquette, Michigan 49855, its successors, assigns and legal representatives, the entire right, title and interest, in and to all subject matter invented by me and disclosed in the application for Letters Patent of the United States entitled:

DRIVER FOR A SURGICAL DEVICE


United States Application Number 13/272,931, filed October 13, 2011, and in and to all Letters Patent and all Convention and Treaty rights of all kinds, including the right to claim priority from said application, and all rights in and to any utility, continuation, continuation-in-part, and divisional application therefrom, and any reissue or re-examination as to any Letters Patent issuing therefrom, in all countries throughout the world, for all such subject matter described therein, including all rights of action and rights to recover damages for past infringements. I agree to sign all documents necessary to secure all said Letters Patent and rights, and request issuance of all said Letters Patent to the above assignee in accordance with this assignment.


12/5, 2011


Daniel Rae Robinson

State of MICHIGAN)
) SS
County of MARQUETTE)

I hereby certify that before me in the County of Marquette, in the State of Michigan, personally appeared **Daniel Rae Robinson**, personally known by me, who then and there was duly sworn by me, and under oath acknowledged that the foregoing assignment was duly signed, sealed, and delivered by him on the date appearing at the foot thereof.

 December 5th, 2011

Notary Public
My Commission Expires


JOHN SULLIVAN
Notary public, Marquette County, Michigan
My commission expires August 24, 2013