

## PATENT ASSIGNMENT

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT										
NATURE OF CONVEYANCE:	ASSIGNMENT										
CONVEYING PARTY DATA											
<table border="1"> <thead> <tr> <th>Name</th> <th>Execution Date</th> </tr> </thead> <tbody> <tr> <td>Frank J. Viola</td> <td>08/16/2007</td> </tr> </tbody> </table>		Name	Execution Date	Frank J. Viola	08/16/2007						
Name	Execution Date										
Frank J. Viola	08/16/2007										
RECEIVING PARTY DATA											
<table border="1"> <tr> <td>Name:</td> <td>Tyco Healthcare Group LP</td> </tr> <tr> <td>Street Address:</td> <td>15 Hampshire Street</td> </tr> <tr> <td>City:</td> <td>Mansfield</td> </tr> <tr> <td>State/Country:</td> <td>MASSACHUSETTS</td> </tr> <tr> <td>Postal Code:</td> <td>02048</td> </tr> </table>		Name:	Tyco Healthcare Group LP	Street Address:	15 Hampshire Street	City:	Mansfield	State/Country:	MASSACHUSETTS	Postal Code:	02048
Name:	Tyco Healthcare Group LP										
Street Address:	15 Hampshire Street										
City:	Mansfield										
State/Country:	MASSACHUSETTS										
Postal Code:	02048										
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>13648620</td> </tr> </tbody> </table>		Property Type	Number	Application Number:	13648620						
Property Type	Number										
Application Number:	13648620										
CORRESPONDENCE DATA											
Fax Number:	2038212183										
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>											
Phone:	203-492-5000										
Email:	Patents.Surgical@Covidien.com										
Correspondent Name:	Covidien LP										
Address Line 1:	555 Long Wharf Drive										
Address Line 2:	Mailstop 8 N-1, Legal Department										
Address Line 4:	NEW HAVEN, CONNECTICUT 06511										
ATTORNEY DOCKET NUMBER:	H-US-00922CON2(203-5468)										
NAME OF SUBMITTER:	Aryn Wadadli										
Total Attachments: 2 source=HUS00922CON2Assignment#page1.tif source=HUS00922CON2Assignment#page2.tif											

CH \$40.00 13648620

For:  U.S. and/or  Foreign Rights  
For:  U.S. Application or  U.S. Patent  
By :  Inventor or  Present Owner

**ASSIGNMENT OF INVENTION**

In consideration of the payment by ASSIGNEE to ASSIGNORS of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,  
**ASSIGNORS:**

**Frank J. Viola**

(If assignment is by person or entity to whom invention was previously assigned and this was recorded in PTO add the following)

Recorded on: \_\_\_\_\_  
Reel \_\_\_\_\_  
Frame \_\_\_\_\_

hereby sells, assigns and transfers to

ASSIGNEE:

Tyco Healthcare Group LP  
195 McDermott Road  
North Haven, CT 06473  
US

and the successors, assigns and legal representatives of the ASSIGNEE

the entire right, title and interest

an undivided \_\_\_\_\_ percent ( \_\_\_\_\_ %) interest for the United States and its territorial possessions

and in all foreign countries, including all rights to claim priority, the right to sue for present, past and future infringement, in the United States, its territorial possessions, and in all foreign countries, including all treaty and convention rights in and to the invention and any and all improvements entitled:

**FLEXIBLE ENDOLUMINAL SURGICAL INSTRUMENT**

and which is found in

- (a)  U.S. patent application executed on even date herewith.
- (b)  U.S. patent application executed on \_\_\_\_\_.
- (c)  U.S. application Serial No. 11/787,989 filed on April 17, 2007.
- (d)  U.S. provisional application No. \_\_\_\_\_ filed on \_\_\_\_\_.
- (e)  U.S. Patent No. \_\_\_\_\_ issued \_\_\_\_\_.
- (f)  PCT application No. \_\_\_\_\_  
filed on \_\_\_\_\_
- A change of address to which correspondence is to be sent regarding patent maintenance fees is being sent separately.
- (g)  and any legal equivalent thereof in a foreign country, including the right to claim priority and, in and to, all Letters Patent to be obtained for said invention by the above application or any continuation, continuation-in-part, divisional, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof

ASSIGNORS hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment;

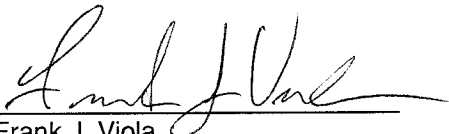
ASSIGNORS hereby authorizes and requests the Commissioner of Patents and Trademarks to issue all such Letters Patent to ASSIGNEE:

ASSIGNORS further covenants to promptly provide all pertinent facts and documents known and accessible to ASSIGNORS relating to said invention and said Letters Patent and legal equivalents; to testify as to the same in any interference, litigation or proceeding related thereto; to execute and deliver any and all papers that may be necessary or desirable to perfect the title to said invention or any Letters Patents which may be granted therefor in said ASSIGNEE, its successors, assigns or other legal representatives; to execute any additional or divisional applications for patents for said invention, or any part or parts thereof, and for the reissue of any Letters Patents to be granted therefor; and to make all rightful oaths and do all lawful acts requisite for procuring the same or for aiding therein, all without further compensation, but at the sole expense of ASSIGNEE, its successors, assigns, or other legal representatives.

ASSIGNORS hereby grants ASSIGNEE and Assignee's attorneys the power to insert the Serial No. and/or filing date of the above-described application(s) after such information becomes known to them.

IN WITNESS WHEREOF, I/We have hereunto set hand and seal.

**WARNING:** Date of signing must be the **same as** the date of execution of the application if item (a) was checked above.

  
\_\_\_\_\_  
Frank J. Viola

August 16, 2007  
\_\_\_\_\_  
Dated

State of Connecticut            )  
  ) ss  
County of New Haven         )

Before me this 16 day of August 2007,

personally appeared **Frank J. Viola** to me personally known to be the person described in and who executed the above instrument, and acknowledged to me that he executed the same of his own free will for the purposes therein set forth.

  
\_\_\_\_\_  
Notary Public

**Erika T. Edwards**  
**Notary Public**  
**State of Connecticut**  
**My Commission Expires**  
**November 30, 2009**

AFFIX SEAL