

PATENT ASSIGNMENT

Electronic Version v1.1
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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Edwin G. COX	10/23/2012
RECEIVING PARTY DATA	
Name:	Northrop Grumman Systems Corporation
Street Address:	2980 Fairview Park Drive
City:	Falls Church
State/Country:	VIRGINIA
Postal Code:	22042-4511
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	13636800
CORRESPONDENCE DATA	
Fax Number:	2026622739
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	2026622738
Email:	seanwooden@andrewskurth.com
Correspondent Name:	Sean S. Wooden
Address Line 1:	1350 I Street, NW
Address Line 2:	Suite 1100
Address Line 4:	Washington, DISTRICT OF COLUMBIA 20005
ATTORNEY DOCKET NUMBER:	205870
NAME OF SUBMITTER:	Sean S. Wooden
Total Attachments: 4 source=EdwinCoxRepASSIGNMENT#page1.tif source=EdwinCoxRepASSIGNMENT#page2.tif source=StatementLegalRepresentative#page1.tif source=StatementLegalRepresentative#page2.tif	

CH \$40.00 13636800

PATENT

ASSIGNMENT

WHEREAS, I, Kristy M. GRANT, together with Edwin G. COX and James W. BLAIR, hereinafter referred to as Assignor have jointly invented certain new and useful improvements in

A SYSTEM AND METHOD FOR PROVIDING A HIGH EFFICIENCY BYPASS CIRCUIT FOR MULTI-STAGE DC-DC CONVERTERS USED IN BATTERY POWERED SYSTEMS

described in an application for United States Letters Patent, filed on September 24, 2012 under Application Serial No. 13/636,800, executed by me on the date as stated below;

WHEREAS, Northrop Grumman Systems Corporation, a Delaware corporation, having its principal place of business at 2980 Fairview Park Drive, Falls Church, VA 22042-4511, United States of America, hereinafter referred to as Assignee, is desirous of acquiring the entire right, title and interest in, to and under said improvements and said application:

NOW, THEREFORE, in consideration of Assignor's obligations to Northrop Grumman Systems Corporation, and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Assignor has sold, assigned, transferred and set over, and by these presents does hereby sell, assign, transfer and set over, unto Assignee, its successors, legal representatives and assigns, Assignor's entire right, title and interest in, to and under said improvements, and said application and all divisions, renewals, continuations, and continuations-in-part thereof, and all United States Letters patent that may be granted thereon and all reissues and extensions thereof, and all applications for Letters Patent that may hereafter be filed for said improvements in any country or countries foreign to the United States, including the full right to claim for any such application the priority benefits of the International Convention for the Protection of Industrial Property and other priority-conferring treaties, and all Letters Patent that may be granted for said improvements in any country or countries foreign to the United States and all extensions, divisions, continuations, continuations-in-part, renewals and reissues thereof, and Assignor hereby authorizes and requests the Commissioner of Patents and Trademarks of the United States, and any official of any country or countries foreign to the United States, whose duty it is to issue patents on applications as aforesaid, to issue all Letters Patent for said improvements to said Assignee, its successors, legal representatives and assigns, in accordance with the terms of this instrument;

Assignor hereby acknowledges that at the time of making the improvements herein identified, Assignor was under an obligation to assign to Assignee, Assignor's entire right, title and interest in, to and under said improvements;

Assignor hereby covenants that Assignor has full right to convey the interest herein assigned, and that Assignor has not executed, and will not execute, any agreement in conflict herewith and that Assignee, Northrop Grumman Systems Corporation, its successors, assigns and other legal representatives shall have the right to hold and enjoy for its and their own use and benefit, to the end of the term or terms for which such Letters Patent shall or may be granted, reissued or extended as fully and completely as the same right could have been held and enjoyed by Assignor had this Assignment not been made.

Assignor hereby further covenants and agrees to communicate to Assignee, its successors, legal representatives and assigns, any and all facts known to Assignor respecting said improvements; to promptly provide Assignee with all documents relating to said improvements, said invention, and said Letters Patent as may be known or accessible to Assignor; to testify as to the same in any interference or litigation or other legal proceedings related thereto; to sign all lawful papers, execute all extensions, continuations, continuations-in-part, divisional and reissue applications; and to make all rightful oaths or declarations and generally do everything possible to aid Assignee, its successors, legal representatives and

IN WITNESS WHEREOF, the undersigned has executed and delivered this instrument this _____ day of October, 2012.

Reba Cox

Reba Cox, Legal Representative of Edwin G. Cox (deceased),
signing on behalf of Edwin G. Cox

STATE OF NORTH CAROLINA)
COUNTY OF Guilford) ss

On Oct 23 2012 before me, Anita L. Russell,
personally appeared Reba Cox, proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to this instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument to be the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of North Carolina that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Anita L. Russell
Notary's Signature

(SEAL)

ANITA L. RUSSELL
Notary Public - North Carolina
Guilford County
My Commission Expires April 26, 2014

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 13/836,800
Applicant : Kristy M. GRANT et al.
Filed : September 24, 2012
Title : SYSTEM AND METHOD FOR PROVIDING A HIGH EFFICIENCY
BYPASS CIRCUIT FOR MULTI-STAGE DC-DC CONVERTERS USED IN
BATTERY POWERED SYSTEMS
TC/A.U. : TBA
Examiner : TBA
Docket No. : 205870
Customer No. : 038598

Mail Stop Amendment
Commissioner of Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

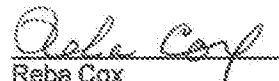
STATEMENT OF LEGAL REPRESENTATIVE
OF DECEASED INVENTOR EDWIN COX UNDER 37 CFR 1.64

Dear Sir:

My name is Reba Cox and Edwin Cox was my husband until he passed away (see attached Death Certificate). I am the legal representative of Mr. Cox. Mr. Cox is a named inventor of the above-identified application. Since I am his legal representative and he is deceased, I have executed the attached Assignment, Declaration and Power of Attorney on his behalf. As required by 37 CFR 1.64: I am a U.S. Citizen, my residential and mailing address is 300 Woodmont Road, Jamestown, NC 27282. If necessary, I can provide proof that I am Mr. Cox's legal representative.

Respectfully submitted,

Date: 10-23-2012


Reba Cox
300 Woodmont Road
Jamestown, NC 27282

Attachment

STATE OF NORTH CAROLINA
CERTIFICATION OF VITAL RECORD

JEFF L. THIGPEN
GUILFORD COUNTY REGISTER OF DEEDS

Book 294 Page 2287

NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
 N. C. VITAL RECORDS
CERTIFICATE OF DEATH



D 294 2287

Registration District No. 041-95 Local No. _____

DECEDENT		1. Edwin Grover Cox		SEX: M	DATE OF DEATH (Month, Day, Year): November 17, 2011
SOCIAL SECURITY NUMBER: 246/56/9628		AGE - Last Birthday (Years): 72	UNDER 1 YEAR: Months: _____ Days: _____	OVER 1 YEAR: Hours: _____ Minutes: _____	DATE OF BIRTH (Month, Day, Year): 03/29/1939
WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No): Yes		PLACE OF DEATH (Check only one): 7. Honolulu, HI			
FACILITY NAME (If not institution, give street and number): 8. Moses H. Cone Hospital		CITY, TOWN, OR LOCATION OF DEATH: 9. Greensboro		INSIDE CITY LIMITS? (Yes or No): Yes	COUNTY OF DEATH: 10. Guilford
MARRITAL STATUS - Married, Never Married, Widowed, Divorced (Specify): 11. Married		SURVIVING SPOUSE (If wife, give maiden name): 11. Reba Maness		DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): 12. Electrical Engineer	
RESIDENCE - STATE: 13a. NC		CITY, TOWN, OR LOCATION: 13b. Guilford		STREET AND NUMBER: 13c. 300 Woodmont Dr.	
INSIDE CITY LIMITS? (Yes or No): Yes		ZIP CODE: 27282		DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (1-12) College (13-17): 14. 17+	
PARENTS		FATHER'S NAME (First, Middle, Last): 17. Emmette Grover Cox		MOTHER'S NAME (First, Middle, Maiden Surname): 18. Neta Trogdon	
INFORMANT		INFORMANT'S NAME (Type/Print): 19a. Reba M. Cox		MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 19b. 300 Woodmont Dr., Jamestown, NC 27282	
CAUSE OF DEATH		Part I. Enter the disease, injury, or complication that caused the death. Do not state the mode of dying, such as homicide or respiratory arrest, shock or heart failure. If appropriate, enter tobacco, alcohol, or drug use. List only one cause on each line 20a-20c. IMMEDIATE CAUSE (Final disease or condition resulting in death): a. Respiratory Failure DUE TO (OR AS A CONSEQUENCE OF): _____ Sequence of conditions (If any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST): b. Increased central Pressure DUE TO (OR AS A CONSEQUENCE OF): _____ c. CVA / stroke DUE TO (OR AS A CONSEQUENCE OF): _____ Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I, such as tobacco, alcohol, or drug use; diabetes, etc. _____			
CERTIFIER		SIGNATURE AND TITLE OF CERTIFIER: Lee Chamberliss, M.D.		DATE SIGNED (Month, Day, Year): 11/2/11	
DISPOSITION		METHOD OF DISPOSITION: <input checked="" type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal <input type="checkbox"/> Donation <input type="checkbox"/> Other		PLACE OF DISPOSITION (Name of cemetery, crematory, or other): Guilford Memorial Park	
NAME AND ADDRESS OF FUNERAL HOME: 25a. Hanes-Linsberry FH: 6000 High Point Rd. Greensboro, NC 27407		NAME OF FUNERAL DIRECTOR: 26a. M. Neil Whitaker		LICENSE NUMBER: 26b. FS 851	
REGISTRAR'S SIGNATURE: Merle Green		DATE FILED (Month, Day, Year): 11-23-11		NAME OF EMBALMER: 28a. Walter Roberts	
				LICENSE NUMBER: 28b. FS 1730	

I HEREBY CERTIFY THAT THIS IS A TRUE AND ACCURATE COPY WHICH APPEARS ON RECORD IN THE OFFICE OF REGISTER OF DEEDS, GUILFORD COUNTY, N.C. IN BOOK 294 PAGE 2287. WITNESS MY HAND AND SEAL THIS 1st OF DECEMBER, 2011.

JEFF L. THIGPEN, REGISTER OF DEEDS
 BY: *[Signature]*
 ASSISTANT/DEPUTY REGISTER OF DEEDS



PATENT