

PATENT ASSIGNMENT

Electronic Version v1.1
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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>Adam Arabian</td> <td>02/01/2013</td> </tr> <tr> <td>David Alan Boone</td> <td>01/31/2013</td> </tr> <tr> <td>Ben Gilbert Macomber</td> <td>01/31/2013</td> </tr> <tr> <td>Tyler Butel</td> <td>03/05/2013</td> </tr> <tr> <td>Robert Dustin Lane</td> <td>01/31/2013</td> </tr> </tbody> </table>		Name	Execution Date	Adam Arabian	02/01/2013	David Alan Boone	01/31/2013	Ben Gilbert Macomber	01/31/2013	Tyler Butel	03/05/2013	Robert Dustin Lane	01/31/2013
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<table border="1"> <tr> <td>Name:</td> <td>Orthocare Innovations LLC</td> </tr> <tr> <td>Street Address:</td> <td>840 Research Parkway, Suite 200</td> </tr> <tr> <td>City:</td> <td>Oklahoma City</td> </tr> <tr> <td>State/Country:</td> <td>OKLAHOMA</td> </tr> <tr> <td>Postal Code:</td> <td>73104</td> </tr> </table>		Name:	Orthocare Innovations LLC	Street Address:	840 Research Parkway, Suite 200	City:	Oklahoma City	State/Country:	OKLAHOMA	Postal Code:	73104		
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PROPERTY NUMBERS Total: 1													
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CORRESPONDENCE DATA													
<p>Fax Number: 2062240779 <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i></p> <p>Phone: (206)682-8100 Email: efiling@cojk.com Correspondent Name: Laura A. Cruz, Esq. Address Line 1: Christensen O'Connor Johnson Kindness Address Line 2: 1420 Fifth Avenue, Suite 2800 Address Line 4: Seattle, WASHINGTON 98101-2347</p>													
ATTORNEY DOCKET NUMBER:	ORIL139508												
NAME OF SUBMITTER:	Laura A. Cruz												

OP \$40.00 13540388

Total Attachments: 7

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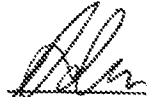
ASSIGNMENT

WHEREAS, we, Adam Arabian, residing at 9961 Silver Sound Lane NW, Silverdale, Washington 98383; David Alan Boone, residing at 4202 Northeast 110th Street, Seattle, Washington 98125; Ben Gilbert Macomber, residing at 16747 North Park Avenue North, Shoreline, Washington 98133; Tyler Butel, residing at 12605 Sholom Road, Edmond, Oklahoma 73013; and Robert Dustin Lane, residing at 6100 Phinney Avenue North, Apt. E, Seattle, Washington 98103, are the inventors named in an application for Letters Patent of the United States entitled **PROSTHETIC HYDRAULIC JOINT WITH ACCUMULATOR AND METHODS FOR CONTROLLING JOINT**, Application No. 13/540388, filed July 2, 2012;

AND, WHEREAS, Orthocare Innovations LLC, a Delaware corporation having a principal place of business at 840 Research Parkway, Suite 200, Oklahoma City, Oklahoma 73104 (hereinafter referred to as ASSIGNEE), is desirous of acquiring our entire right and title to and interest in our invention disclosed in said application;

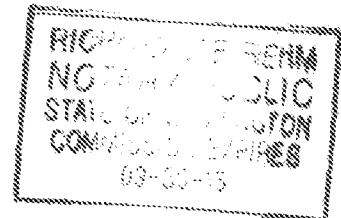
NOW, THEREFORE, for sufficient, good, and valuable consideration, the receipt of which is hereby acknowledged, we do hereby sell, assign, and transfer unto ASSIGNEE our entire right and title to and interest in said application and said invention, including the right to apply for international patents and patents thereon in foreign countries in our name or in the name of ASSIGNEE, said invention and all applications and patents on said invention to be held and enjoyed by ASSIGNEE as entirely as the same would have been held and enjoyed by us had this sale, assignment, and transfer not been made; and we do hereby further agree and promise to execute all instruments and render all such assistance as ASSIGNEE may request in order to make and prosecute any and all applications on said invention, to enforce any and all patents on said invention, and to confirm in ASSIGNEE legal title to said invention and all applications and patents on said invention, all without charge to ASSIGNEE but at no expense to us.

Executed at Seattle (city), Washington, this 1 day of February, 2012 2013


Adam Arabian

STATE OF WASHINGTON)
) ss.
COUNTY OF King)

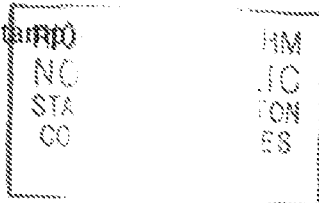
I certify that I know or have satisfactory evidence that Adam Arabian is the person who appeared before me, and said person acknowledged that he signed this instrument and



acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: 1st February 2013

(Seal or stamp)



Richard Lee Behm

Signature

Notary Public

My appointment expires 9-30-15

Executed at _____ (city), Washington, this _____ day of _____, 2012.

David Alan Boone

STATE OF WASHINGTON)
) ss.
COUNTY OF _____)

I certify that I know or have satisfactory evidence that David Alan Boone is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: _____

(Seal or stamp)

Signature

Printed Name: _____

Notary Public

My appointment expires _____

acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: _____

(Seal or stamp)

Signature
Notary Public
My appointment expires _____

Executed at Lynnwood (city), Washington, this 31st day of January, 2013.

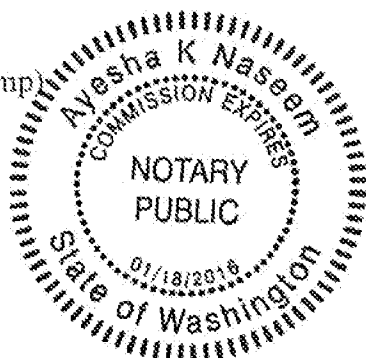
David Alan Boone
David Alan Boone

STATE OF WASHINGTON)
) ss.
COUNTY OF Inghamish)

I certify that I know or have satisfactory evidence that David Alan Boone is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

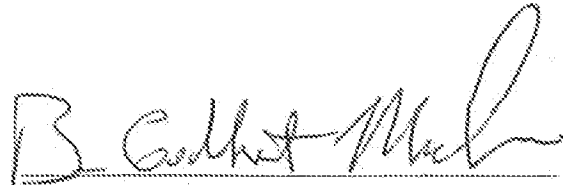
Dated: 1/31/2013

(Seal or stamp)



Ayesha K. Naseem
Signature
Printed Name: AYESHA K. NASEEM
Notary Public
My appointment expires 1/18/2016

Executed at _____ (city), Washington, this _____ day of _____, 201____.

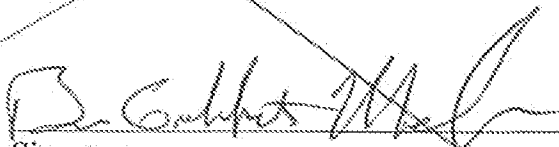

Ben Gilbert Macomber

STATE OF WASHINGTON)
) ss.
COUNTY OF _____)

I certify that I know or have satisfactory evidence that Ben Gilbert Macomber is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: _____

(Seal or stamp)


Signature
Printed Name: Ben Gilbert Macomber
Notary Public
My appointment expires _____

All-purpose Acknowledgment

STATE OF Washington, COUNTY OF Shohemish

On January 31, 2013 before me, the undersigned, a Notary Public
in and for said State, personally appeared

Ben Gilbert Malcomber

☐ personally known to me -OR- ☒ proved to me on the basis of satisfactory evidence/ to be the person(s)
whose name(s) is/are subscribed to the within 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 the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature

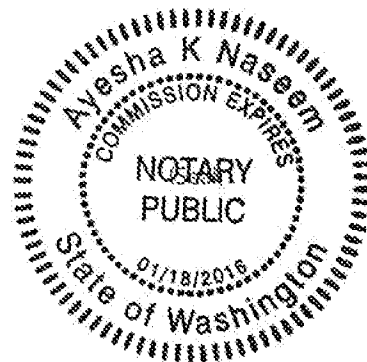
Ayesha K. Naseem

Name (type or printed)

AYESHA K. NASEEM

My commission expires:

1/18/2016



Executed at Oklahoma City (city), Oklahoma, this 5th day of March, 2013.

[illegible]

Dated: March 5, 2013

My appointment expires 11/29/14

Executed at Lynnwood (city), Washington, this 31st day of January, 2013.

Robert Dustin Lane
Robert Dustin Lane

STATE OF WASHINGTON)
) ss.
COUNTY OF Snohomish)

I certify that I know or have satisfactory evidence that Robert Dustin Lane is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: 1/31/2013

(Seal or stamp)

Ayesha K. Naseem
Signature
Printed Name: AYESHA K. NASEEM
Notary Public
My appointment expires 1/18/2016

