

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>Thomas R. Hessler</td> <td>11/16/2009</td> </tr> <tr> <td>Keith Milliman</td> <td>11/16/2009</td> </tr> </tbody> </table>		Name	Execution Date	Thomas R. Hessler	11/16/2009	Keith Milliman	11/16/2009				
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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
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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>13848292</td> </tr> </tbody> </table>		Property Type	Number	Application Number:	13848292						
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CORRESPONDENCE DATA											
<p>Fax Number: 2038212183 <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i></p> <p>Phone: 203-492-5000</p> <p>Email: Patents.Surgical@Covidien.com</p> <p>Correspondent Name: Covidien LP</p> <p>Address Line 1: 555 Long Wharf Drive</p> <p>Address Line 2: Mailstop 8 N-1, Legal Department</p> <p>Address Line 4: NEW HAVEN, CONNECTICUT 06511</p>											
ATTORNEY DOCKET NUMBER:	H-US-01539CON2(203-6544)										
NAME OF SUBMITTER:	Amy L. Lydon										
<p>Total Attachments: 3</p> <p>source=HUS01539CON2Assignment#page1.tif</p> <p>source=HUS01539CON2Assignment#page2.tif</p> <p>source=HUS01539CON2Assignment#page3.tif</p>											

CH \$40.00 13848292

For: ☒ U.S. and/or ☒ Foreign Rights
For: ☒ U.S. Application or ☐ U.S. Patent
By : ☒ Inventor(s) 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:

Thomas R. Hessler
Keith Milliman

(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
60 Middletown Avenue
North Avenue, 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:

SURGICAL STAPLER

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. 12/542,064 filed on Oct. 20, 2004.
- (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) [X] 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;

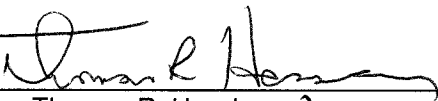
ASSIGNORS hereby authorizes and requests the Commissioner of Patents and Trademarks to issue all such Letters Patent to ASSIGNEE:

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.


1. Thomas R. Hessler

11/16/09
Dated


2. Keith Milliman

11/16/09
Dated

[] Check here for added signature pages for fifth and subsequent inventors.

[X] Notarization or Legalization Page Added.

1.

State of Connecticut

County of NEW HAVEN) ss NORTH HAVEN

Before me this 16 day of NOVEMBER 2009,

personally appeared THOMAS R. HEDDER to me personally known to be the person described in and who executed the above instrument, and acknowledged to me that he/she executed the same of his own free will for the purposes therein set forth.


Notary Public

AFFIX SEAL

SUSAN S. RICKARD
NOTARY PUBLIC
MY COMMISSION EXPIRES AUG. 31, 2011

2.

State of Connecticut

County of NEW HAVEN) ss NORTH HAVEN

Before me this ____ day of _____ 2009,

personally appeared KEITH MILLMAN to me personally known to be the person described in and who executed the above instrument, and acknowledged to me that he/she executed the same of his own free will for the purposes therein set forth.


Notary Public

AFFIX SEAL

SUSAN S. RICKARD
NOTARY PUBLIC
MY COMMISSION EXPIRES AUG. 31, 2011

3.

State of Connecticut

County of _____) ss _____
_____)

Before me this ____ day of _____ 2009,

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

Notary Public

AFFIX SEAL