

Form PTO-159S (Rev. 03-11)  
OMB No. 0651-0027 (exp. 03/31/2015)

U.S. DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office

## RECORDATION FORM COVER SHEET PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

### 1. Name of conveying party(ies):

Rafail Zubok (10/17/2003), Michael W. Dudasik  
(10/17/2003), and Joseph P. Errico (10/17/2003)

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

### 2. Name and address of receiving party(ies)

Name: SpineCore, Inc.

Internal Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

2 Pearl Court

City: Allendale

State: New Jersey

Country: United States of America Zip: 07401

Additional name(s) & address(es) attached? ☐ Yes ☒ No

### 3. Nature of conveyance/Execution Date(s):

Execution Date(s): in parentheses after inventor name

☒ Assignment ☐ Merger ☐ Change of Name

☐ Security Agreement ☐ Joint Research Agreement

☐ Government Interest Assignment

☐ Executive Order 9424, Confirmatory License

☐ Other \_\_\_\_\_

### 4. Application or patent number(s):

A. Patent Application No.(s)

13/856,491

☐ This document is being filed together with a new application.

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

### 5. Name and address to whom correspondence concerning document should be mailed:

Name: Brent L. Farese  
LERNER, DAVID, LITTENBERG,  
KRUMHOLZ & MENTLIK, LLP

Internal Address: Atty. Dkt.:

Street Address: 600 South Avenue West

City: Westfield

State: NJ Zip: 07090

Phone Number: 908-654-5000

Fax Number: 908-654-7866

Email Address: ataylor@ldlkm.com

### 6. Total number of applications and patents involved:

1

### 7. Total fee (37 CFR 1.21(h) & 3.41) \$ 40.00


- ☒ Authorized to be charged to deposit account  
☐ Enclosed  
☐ None required (government interest not affecting title)

### 8. Payment information

Deposit Account Number 12-1095

Authorized User Name Brent L. Farese

### 9. Signature:

  
Signature

Brent L. Farese - 63,617  
Name of Person Signing

5/2/13  
Date

Total number of pages including cover sheet, attachments, and documents:

4

## ASSIGNMENT OF APPLICATION

Docket Number (Optional)

P-299

Whereas, I/We, Rafail Zubok of Midland Park, NJ hereafter referred to as applicant, have invented certain new and useful improvements in Instrumentation and Methods for use in Implanting a Cervical Disc Replacement Device

☐ for which an application for a United States Patent was filed on \_\_\_\_\_  
Application Number \_\_\_\_\_

☒ for which an application for a United States Patent was executed on 10/17/2003, and

Whereas, SpineCore, Inc. of Summit, NJ herein referred to "assignee" whose mailing address is 447 Springfield Avenue, Summit, NJ 07931 is desirous of acquiring the entire right, title and interest in the same;


Now, therefore, in consideration of the sum of one dollar (\$1.00), the receipt whereof is acknowledged, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign, and transfer unto said assignee the full and exclusive right to the said invention and the entire right, title and interest in and to any and all Patents which may be granted therefor. I/We hereby authorize and request that said Patent be issued to said assignee, of the entire, right, title and interest in and to the same, for his sole use and behoof, and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

Executed this 17th day of October, 2003  
at Midland Park, NJ

State of \_\_\_\_\_

County of \_\_\_\_\_

SS:

  
(Signature)

Before me personally appeared said \_\_\_\_\_  
and acknowledged the foregoing instrument to be his free act and deed this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_.

Seal

(Notary Public)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

\* ☒ Total of 3 forms are submitted.

## ASSIGNMENT OF APPLICATION

Docket Number (Optional)

P-299

Whereas, I/We, Michael W. Dudasik; of Nutley, NJ, hereafter referred to as applicant, have invented certain new and useful improvements in Instrumentation and Methods for use in Implanting a Cervical Disc Replacement Device

☐ for which an application for a United States Patent was filed on \_\_\_\_\_  
Application Number \_\_\_\_\_

☒ for which an application for a United States Patent was executed on 10/17/2003, and

Whereas, SpineCore, Inc. of Summit, NJ herein referred to "assignee" whose mailing address is 447 Springfield Avenue, Summit, NJ 07931 is desirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of one dollar (\$1.00), the receipt whereof is acknowledged, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign, and transfer unto said assignee the full and exclusive right to the said invention and the entire right, title and interest in and to any and all Patents which may be granted therefor. I/We hereby authorize and request that said Patent be issued to said assignee, of the entire, right, title and interest in and to the same, for his sole use and behoof, and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

Executed this 17th day of October, 20 03  
at Nutley, NJ

State of \_\_\_\_\_

County of \_\_\_\_\_

SS:

Before me personally appeared said \_\_\_\_\_

and acknowledged the foregoing instrument to be his free act and deed this \_\_\_\_\_

day of \_\_\_\_\_, 20 \_\_\_\_.

Seal

(Notary Public)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

\* ☒ Total of 9 forms are submitted.

## ASSIGNMENT OF APPLICATION

Docket Number (Optional)

R-299

Whereas, I/We, Joseph P. Errico of Green Brook, NJ, hereafter referred to as applicant, have invented certain new and useful improvements in Instrumentation and Methods for use in Implanting a Cervical Disc Replacement Device

☐ for which an application for a United States Patent was filed on \_\_\_\_\_  
Application Number \_\_\_\_\_/\_\_\_\_\_

☒ for which an application for a United States Patent was executed on 10/17/2003, and

Whereas, SpineCore, Inc. of Summit, NJ herein referred to "assignee" whose mailing address is 447 Springfield Avenue, Summit, NJ 07981 is desirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of one dollar (\$1.00), the receipt whereof is acknowledged, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign, and transfer unto said assignee the full and exclusive right to the said invention and the entire right, title and interest in and to any and all Patents which may be granted therefor. I/We hereby authorize and request that said Patent be issued to said assignee, of the entire, right, title and interest in and to the same, for his sole use and behoof, and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

Executed this 17th day of October, 20 03  
at Green Brook, NJ

State of \_\_\_\_\_

County of \_\_\_\_\_

SS:

  
(Signature)

Before me personally appeared said \_\_\_\_\_  
and acknowledged the foregoing instrument to be his free act and deed this \_\_\_\_\_  
day of \_\_\_\_\_, 20 \_\_\_\_\_.

Seal

(Notary Public)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

\* ☒ Total of 3 forms are submitted.