

## 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>Victor Yang</td> <td>09/05/2013</td> </tr> <tr> <td>Peter Siegler</td> <td>09/05/2013</td> </tr> <tr> <td>Adrian Linus Dinesh Mariampillai</td> <td>09/05/2013</td> </tr> <tr> <td>Michael Ka Kit Leung</td> <td>09/05/2013</td> </tr> <tr> <td>Beau Anthony Standish</td> <td>09/05/2013</td> </tr> </tbody> </table>		Name	Execution Date	Victor Yang	09/05/2013	Peter Siegler	09/05/2013	Adrian Linus Dinesh Mariampillai	09/05/2013	Michael Ka Kit Leung	09/05/2013	Beau Anthony Standish	09/05/2013
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<table border="1"> <tr> <td>Name:</td> <td>7D Surgical Inc.</td> </tr> <tr> <td>Street Address:</td> <td>350 Victoria Street</td> </tr> <tr> <td>City:</td> <td>Toronto, ON</td> </tr> <tr> <td>State/Country:</td> <td>CANADA</td> </tr> <tr> <td>Postal Code:</td> <td>M5B 2K3</td> </tr> </table>		Name:	7D Surgical Inc.	Street Address:	350 Victoria Street	City:	Toronto, ON	State/Country:	CANADA	Postal Code:	M5B 2K3		
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CORRESPONDENCE DATA													
<p>Fax Number: 7037399889  <i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i></p> <p>Phone: 703-739-9888        Email: dowell@dowellpc.com        Correspondent Name: DOWELL &amp; DOWELL P.C.        Address Line 1: 103 Oronoco St.        Address Line 2: Suite 220        Address Line 4: Alexandria, VIRGINIA 22314</p>													
ATTORNEY DOCKET NUMBER:	18643DES												
NAME OF SUBMITTER:	Ralph A. Dowell												

OP \$40.00 29459846

Signature:	/Ralph A Dowell/
Date:	09/13/2013
<b>Total Attachments: 7</b> source=18643sassignment#page1.tif source=18643sassignment#page2.tif source=18643sassignment#page3.tif source=18643sassignment#page4.tif source=18643sassignment#page5.tif source=18643sassignment#page6.tif source=18643sassignment#page7.tif	

WORLDWIDE ASSIGNMENT

WE, VICTOR YANG, PETER SIEGLER, ADRIAN LINUS DINESH MARIAMPILLAI, MICHAEL KA KIT LEUNG and BEAU ANTHONY STANDISH, whose full post office addresses are, 350 Victoria Street, Toronto, Ontario M5B 2K3, Canada, 1507-25 Broadway Avenue, Toronto, Ontario M4P 1T7, Canada, 381 Front Street West, Appt./Suite 1210, Toronto, Ontario M5V 3R8, Canada, 187 Adrian Crescent, Markham, Ontario L3P 6Z6, Canada and 267 Glebe Mount Avenue, Toronto, Ontario M4C 3T7, Canada, have invented a design "**HANDHELD SUPPORT FOR FIDUCIAL MARKERS**" for which the United States design patent application was filed:

Filing Date: July 3, 2013  
Serial No. 29/459,846

in consideration of Two Dollars (\$2.00) paid to US, the receipt and sufficiency of which is hereby acknowledged, and other good and valuable consideration, WE by these presents confirm that WE have sold, transferred and assigned and do hereby sell, transfer and assign to **7D SURGICAL INC. (Assignee)** having offices at, 350 Victoria Street, Toronto, Ontario M5B 2K3, Canada, its successors and assigns or nominees, all OUR rights, title and interest in the United States and all other countries of the world in and to MY invention as fully described and claimed in the United States design patent application, and WE sell, assign and transfer to **7D SURGICAL INC.** all OUR rights to apply for protection for said invention in the United States and all other countries of the world including any and all divisions, continuations, continuation-in-part, re-examinations, renewals, reissues and/or extensions thereof, and all OUR corresponding rights, title and interest in and to any design patent, industrial design or design protection which may issue therefor in the United States and all other countries of the world and we each make this assignment independently of each other.


AND WE UNDERTAKE to sign such further documents to effect the aforesaid sale, assignment and transfer as may be required from time to time, without reimbursement, but at the expense of **7D SURGICAL INC.**

AND WE authorize HILL & SCHUMACHER, Patent and Trademark Agents, of 264 Avenue Road, Toronto, Ontario M4V 2G7, Canada to enter the particulars of the signature and particulars of the Declaration when missing.

This assignment can be signed in counterparts.

Signed at (city/town) Toronto

This 5 day of September, 2013.

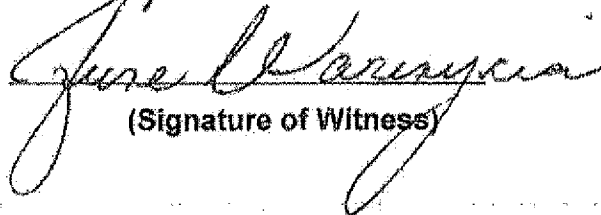
  
VICTOR YANG

DECLARATION OF WITNESS

I, JUNE WAREWYCH, whose full post office address  
is, 6 BRIARCREEK RD SCARBOROUGH, hereby  
declare that I was personally present and did see VICTOR YANG who is personally  
known to me to be the person named in the above assignment duly sign and execute  
the same.


DECLARED at (city/town) Toronto

This 5 day of September, 2013.

  
(Signature of Witness)

Signed at (city/town) TORONTO

This 5<sup>th</sup> day of September, 2013.

  
PETER SIEGLER

#### DECLARATION OF WITNESS

I, Timothy Luk, whose full post office address  
is, 2075 Bayview Ave Toronto ON Canada M4N 3M5 Rm M6-160, hereby  
declare that I was personally present and did see **PETER SIEGLER** who is personally  
known to me to be the person named in the above assignment duly sign and execute  
the same.

DECLARED at (city/town) Toronto

This 5 day of September, 2013.

  
(Signature of Witness)

Signed at (city/town) Toronto

This 5 day of September, 2013.

A. Mariampillai

ADRIAN LINUS DINESH MARIAMPILLAI

DECLARATION OF WITNESS

I, Timothy Luk, whose full post office address  
is, 2675 Bayview Ave. Toronto ON Canada M4N 3M5 Rm M6-160, hereby  
declare that I was personally present and did see **ADRIAN LINUS DINESH**  
**MARIAMPILLAI** who is personally known to me to be the person named in the above  
assignment duly sign and execute the same.

DECLARED at (city/town) Toronto

This 5 day of September, 2013.

[Signature]

(Signature of Witness)

Signed at (city/town) Toronto

This 5 day of September, 2013.

Michael Leung  
MICHAEL KA KIT LEUNG

DECLARATION OF WITNESS

I, Timothy Luk, whose full post office address  
is, 2075 Bayview Ave Toronto ON Canada M4N 3M5 Rm 16-16c, hereby  
declare that I was personally present and did see **MICHAEL KA KIT LEUNG**  
who is personally known to me to be the person named in the above assignment duly  
sign and execute the same.

DECLARED at (city/town) Toronto

This 5 day of September, 2013.

[Signature]  
(Signature of Witness)

Signed at (city/town) Toronto

This 5 day of September, 2013.

Beau Standish

BEAU ANTHONY STANDISH

DECLARATION OF WITNESS

I, Timothy Luk, whose full post office address  
is, 2075 Bayview Ave. Toronto ON Canada M4N 3M5 Rm M6-160, hereby  
declare that I was personally present and did see **BEAU ANTHONY STANDISH**  
who is personally known to me to be the person named in the above assignment duly  
sign and execute the same.

DECLARED at (city/town) Toronto

This 5 day of September, 2013.

[Signature]

(Signature of Witness)

## ACCEPTANCE

The Assignee accepts this assignment.

Signed at (city/town) Toronto

This 5 day of September, 2013.

7D SURGICAL INC.

Signature: Beau Standish

Name: Beau Standish

Position: Acting CEO

## DECLARATION OF WITNESS

I, Timothy Luk, whose full post office address  
is, 2075 Bayview Ave Toronto ON Canada M4N 3M5 Rm M6-760, hereby declare that I was  
personally present and did see, \_\_\_\_\_, who is  
personally known to me to be the person that has duly signed and executed the above  
assignment on behalf of 7D SURGICAL INC.

DECLARED at (city/town) Toronto

This 5 day of September, 2013.

[Signature]  
(Signature of Witness)