

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT2587856

| 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>KANNAN SRINIVASAN</td> <td>04/25/2008</td> </tr> <tr> <td>BRUCE RICHTER</td> <td>04/30/2008</td> </tr> <tr> <td>CHRISTOPHER A. POHL</td> <td>04/25/2008</td> </tr> <tr> <td>BRETT J. MURPHY</td> <td>04/30/2008</td> </tr> <tr> <td>BRIAN DORICH</td> <td>04/30/2008</td> </tr> <tr> <td>S.M. RAHMAT ULLAH</td> <td>04/25/2008</td> </tr> </tbody> </table> |                            | Name          | Execution Date     | KANNAN SRINIVASAN   | 04/25/2008         | BRUCE RICHTER | 04/30/2008 | CHRISTOPHER A. POHL | 04/25/2008 | BRETT J. MURPHY | 04/30/2008 | BRIAN DORICH | 04/30/2008 | S.M. RAHMAT ULLAH | 04/25/2008 |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Execution Date             |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| KANNAN SRINIVASAN                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 04/25/2008                 |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| BRUCE RICHTER                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 04/30/2008                 |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| CHRISTOPHER A. POHL                                                                                                                                                                                                                                                                                                                                                                                                                                               | 04/25/2008                 |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| BRETT J. MURPHY                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 04/30/2008                 |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| BRIAN DORICH                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 04/30/2008                 |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| S.M. RAHMAT ULLAH                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 04/25/2008                 |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| RECEIVING PARTY DATA                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| <table border="1"> <tr> <td>Name:</td> <td>DIONEX CORPORATION</td> </tr> <tr> <td>Street Address:</td> <td>445 LAKESIDE DRIVE</td> </tr> <tr> <td>City:</td> <td>SUNNYVALE</td> </tr> <tr> <td>State/Country:</td> <td>CALIFORNIA</td> </tr> <tr> <td>Postal Code:</td> <td>94085</td> </tr> </table>                                                                                                                                                             |                            | Name:         | DIONEX CORPORATION | Street Address:     | 445 LAKESIDE DRIVE | City:         | SUNNYVALE  | State/Country:      | CALIFORNIA | Postal Code:    | 94085      |              |            |                   |            |
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DIONEX CORPORATION         |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Street Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 445 LAKESIDE DRIVE         |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| City:                                                                                                                                                                                                                                                                                                                                                                                                                                                             | SUNNYVALE                  |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| State/Country:                                                                                                                                                                                                                                                                                                                                                                                                                                                    | CALIFORNIA                 |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Postal Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 94085                      |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| 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>13958810</td> </tr> </tbody> </table>                                                                                                                                                                                                                                                                                         |                            | Property Type | Number             | Application Number: | 13958810           |               |            |                     |            |                 |            |              |            |                   |            |
| Property Type                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Number                     |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Application Number:                                                                                                                                                                                                                                                                                                                                                                                                                                               | 13958810                   |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| CORRESPONDENCE DATA                                                                                                                                                                                                                                                                                                                                                                                                                                               |                            |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Fax Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                       | (408)965-6010              |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Phone:                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 408-965-6000               |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Email:                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ussjo.ip@thermofisher.com  |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| <i>Correspondence will be sent via US Mail when the email attempt is unsuccessful.</i>                                                                                                                                                                                                                                                                                                                                                                            |                            |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Correspondent Name:                                                                                                                                                                                                                                                                                                                                                                                                                                               | THERMO FISHER/DIONEX       |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Address Line 1:                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 355 RIVER OAKS PARKWAY     |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Address Line 2:                                                                                                                                                                                                                                                                                                                                                                                                                                                   | IP DEPT.                   |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| Address Line 4:                                                                                                                                                                                                                                                                                                                                                                                                                                                   | SAN JOSE, CALIFORNIA 95134 |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |
| ATTORNEY DOCKET NUMBER:                                                                                                                                                                                                                                                                                                                                                                                                                                           | 12369US3/NAT               |               |                    |                     |                    |               |            |                     |            |                 |            |              |            |                   |            |

CH \$40.00 13958810

|                                                                                                                                                                                 |                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| NAME OF SUBMITTER:                                                                                                                                                              | GAIL WARDWELL   |
| Signature:                                                                                                                                                                      | /Gail Wardwell/ |
| Date:                                                                                                                                                                           | 10/23/2013      |
| <b>Total Attachments: 4</b><br>source=12369US3-NAT_ASG#page1.tif<br>source=12369US3-NAT_ASG#page2.tif<br>source=12369US3-NAT_ASG#page3.tif<br>source=12369US3-NAT_ASG#page4.tif |                 |

|            |                                           |             |
|------------|-------------------------------------------|-------------|
| ASSIGNMENT | Application No. 12039,687                 | Page 1 of 4 |
|            | First Named Inventor: Srinivasan          |             |
|            | Title: Sample pretreatment and extraction |             |

WHEREAS, the undersigned

- (1) Kannan Srinivasan resident of Tracy, California
- (2) Bruce Richter resident of Sandy, Utah
- (3) Christopher A. Pohl resident of Union City, California
- (4) Brett Murphy resident of Murray, Utah
- (5) Brian Dorich resident of North Salt Lake, Utah
- (6) S.M. Rahmat Ullah resident of Fremont, California

have invented certain new and useful improvements as described in an application for United States Patent entitled *Sample pretreatment and extraction*, having Application Number 12039,687, filed in the United States Patent and Trademark Office on February 28, 2008; and

WHEREAS, Diomex Corporation, a corporation organized and existing under the laws of the state of Delaware ("Assignee") is desirous of acquiring the entire right, title and interest in and to the invention, the application, and any and all Patents or similar legal protection, foreign or domestic, to be obtained therefor;

NOW, THEREFORE, for good and valuable consideration, the receipt and adequacy of which are hereby acknowledged, I transfer to Assignee, its successors and assigns, my entire right, title, and interest in and to the invention, the above-identified patent application, corresponding domestic applications (including divisionals, continuations, and continuations-in-part), corresponding foreign applications, all Patents or similar legal protection issuing thereon, and all rights and benefits under any applicable treaty or convention; and I authorize the Commissioner of Patents and Trademarks of the United States or foreign equivalent thereof to issue the Patent or similar legal protection to the Assignee.

I authorize the Assignee, its successors and assigns, or anyone it may properly designate, to apply for Patents or similar legal protection in its own name if desired, in any and all foreign countries.

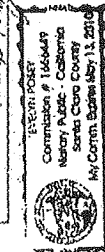
1-SF76480A.1

|            |                                           |             |
|------------|-------------------------------------------|-------------|
| ASSIGNMENT | Application No. 12039,687                 | Page 2 of 4 |
|            | First Named Inventor: Srinivasan          |             |
|            | Title: Sample pretreatment and extraction |             |

I represent to the Assignee, its successors and assigns, that I have not and shall not execute any writing or do any act whatsoever conflicting with this Assignment. I, my executors or administrators, will at any time upon request, without additional consideration, but at the expense of the Assignee, its successors and assigns, execute such additional writings and do such additional acts as the Assignee, its successors and assigns, may deem desirable to perfect its enjoyment of this grant, and render all assistance in making application for and obtaining, maintaining, and enforcing the Patents or similar legal protection on the invention in any and all countries.

(1) Kannan Srinivasan  
Date: 4/25/08

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| STATE OF California                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | is     |
| COUNTY OF Santa Clara                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ss.    |
| On this 25th day of April, 2008, before me, <u>Bruce Richter</u> , Notary Public of the State of California, personally appeared <u>Kannan Srinivasan</u> , known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same in his authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |        |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
| Signature <u>Bruce Richter</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | (Seal) |



(2) Bruce Richter  
Date: 4/25/08

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| STATE OF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | is     |
| COUNTY OF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ss.    |
| On this _____ day of _____, in the year _____, before me, _____, Notary Public of the State of _____, personally appeared _____, known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |        |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |        |
| Signature _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (Seal) |

1-SF76480A.1

|            |                                        |             |
|------------|----------------------------------------|-------------|
| ASSIGNMENT | Application No. 12039,687              | Page 2 of 4 |
|            | First Named Inventor: Srinivasan       |             |
|            | Title: Sample patentment and execution |             |

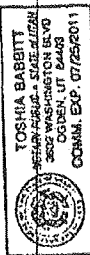
I represent to the Assignee, its successors and assigns, that I have not and shall not execute any writing or do any act whatsoever conflicting with this Assignment. I, my executors or administrators, will at any time upon request, without additional consideration, but at the expense of the Assignee, its successors and assigns, execute such additional writings and do such additional acts as the Assignee, its successors and assigns, may deem desirable to perfect its enjoyment of this grant, and render all assistance in making application for and obtaining, maintaining, and enforcing the Patents or similar legal protection on the invention in any and all countries.

(1) Kannan Srinivasan  
Date: \_\_\_\_\_

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| STATE OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ss. |
| COUNTY OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
| On this _____ day of _____, in the year _____, before me _____, Notary Public of the State of _____, personally appeared _____, known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |     |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |
| Signature _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
| (Seal)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |

(2) Bruce Richter  
Date: 4/30/09

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| STATE OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ss. |
| COUNTY OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
| On this 30 day of April, in the year 2009, before me Tanya Branstetter, Notary Public of the State of _____, personally appeared Bruce Richter, known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |     |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |
| Signature _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
| (Seal)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |

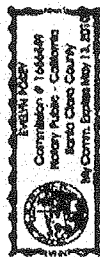


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|            |                                        |             |
|------------|----------------------------------------|-------------|
| ASSIGNMENT | Application No. 12039,687              | Page 3 of 4 |
|            | First Named Inventor: Srinivasan       |             |
|            | Title: Sample patentment and execution |             |

(3) Christopher A. Pohl  
Date: 4/25/08

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| STATE OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ss. |
| COUNTY OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
| On this 25 day of April, in the year 2008, before me _____, Notary Public of the State of _____, personally appeared Christopher A. Pohl, known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |     |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |     |
| Signature _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
| (Seal)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |     |



(4) Brett Murphy  
Date: \_\_\_\_\_

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| STATE OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ss. |
| COUNTY OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
| On this _____ day of _____, in the year _____, before me _____, Notary Public of the State of _____, personally appeared _____, known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |     |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |
| Signature _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
| (Seal)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |

1-SF704804.1

|                                           |             |
|-------------------------------------------|-------------|
| Application No. 12039.687                 | Page 3 of 4 |
| First Named Inventor: Srinivasan          |             |
| Title: Sample pretreatment and extraction |             |

ASSIGNMENT

(3) Christopher A. Pahl

Date: \_\_\_\_\_

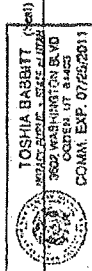
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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------|
| STATE OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | COUNTY OF _____ | ss. _____ |
| On this _____ day of _____ in the year _____ before me _____ Notary Public of the State of _____ personally appeared _____ known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |                 |           |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |           |
| Signature _____ (Seal)                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |           |

*Brett J. Murphy*

(4) Brett Murphy

Date: 4/30/08

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------|
| STATE OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | COUNTY OF _____ | ss. _____ |
| On this _____ day of _____ in the year _____ before me _____ Notary Public of the State of _____ personally appeared _____ known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |                 |           |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |           |
| Signature _____ (Seal)                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |           |



1.577894304.1

|                                           |             |
|-------------------------------------------|-------------|
| Application No. 12039.687                 | Page 4 of 4 |
| First Named Inventor: Srinivasan          |             |
| Title: Sample pretreatment and extraction |             |

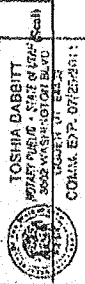
ASSIGNMENT

*Brian C. Dorich*

(5) Brian Dorich

Date: 4/30/08

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------|
| STATE OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | COUNTY OF _____ | ss. _____ |
| On this _____ day of _____ in the year _____ before me _____ Notary Public of the State of _____ personally appeared _____ known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |                 |           |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |           |
| Signature _____ (Seal)                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |           |



(6) S.M. Rahmat Ullah

Date: \_\_\_\_\_

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------|
| STATE OF _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | COUNTY OF _____ | ss. _____ |
| On this _____ day of _____ in the year _____ before me _____ Notary Public of the State of _____ personally appeared _____ known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. |                 |           |
| WITNESS my hand and official seal.                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |           |
| Signature _____ (Seal)                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |           |

1.577894304.1

|            |                                         |             |
|------------|-----------------------------------------|-------------|
| ASSIGNMENT | Application No. 12039,687               | Page 4 of 4 |
|            | First Named Inventor: Srinivasan        |             |
|            | Title: Sample prepayment and extraction |             |

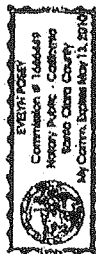
(5) Brian Dorich  
Date: \_\_\_\_\_

STATE OF California  
COUNTY OF San Diego

On this 7th day of July, in the year 2012, before me, Brian Dorich, Notary Public of the State of California, personally appeared S.M. Rahman Ullah, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Signature [Signature] (Seal)



(6) S.M. Rahman Ullah  
Date: 7/25/2012

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me, \_\_\_\_\_, Notary Public of the State of \_\_\_\_\_, personally appeared \_\_\_\_\_, known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same in his/her authorized capacity(ies), and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Signature \_\_\_\_\_ (Seal)