

## PATENT ASSIGNMENT COVER SHEET

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EPAS ID: PAT2717979

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>SCOTT GAMMONS</td> <td>02/03/2014</td> </tr> <tr> <td>CLIFFORD E. GAMMONS</td> <td>02/03/2014</td> </tr> </tbody> </table>		Name	Execution Date	SCOTT GAMMONS	02/03/2014	CLIFFORD E. GAMMONS	02/03/2014
Name	Execution Date						
SCOTT GAMMONS	02/03/2014						
CLIFFORD E. GAMMONS	02/03/2014						
RECEIVING PARTY DATA							
Name:	ADROIT MEDICAL SYSTEMS, INC.						
Street Address:	1146 CARDING MACHINE ROAD						
City:	LOUDON						
State/Country:	TENNESSEE						
Postal Code:	37774						
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>14175201</td> </tr> </tbody> </table>		Property Type	Number	Application Number:	14175201		
Property Type	Number						
Application Number:	14175201						
CORRESPONDENCE DATA							
Fax Number:	(866)481-1019						
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<i>Correspondence will be sent via US Mail when the email attempt is unsuccessful.</i>							
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ATTORNEY DOCKET NUMBER:	12008-UPA						
NAME OF SUBMITTER:	THOMAS A. KULAGA						
Signature:	/Thomas A. Kulaga/						
Date:	02/07/2014						
Total Attachments: 2 source=12008-UPA_Assignments_as-recorded_37628#page1.tif source=12008-UPA_Assignments_as-recorded_37628#page2.tif							

Attorney Docket # 12008-UPA

**ASSIGNMENT**

I, the below-identified Inventor, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to

Adroit Medical Systems, Inc., a corporation of Tennessee,  
domiciled in Loudon County, TN

(the "Assignee"), its successors, assigns, and legal representatives the entire right, title, and interest throughout the world in and to all subject matter invented by me and disclosed in the application for a Letters Patent in the United States associated with the above attorney docket number and titled:

Agitator for surgical slush machine

and in and to all patent and all foreign, convention and treaty rights of all kinds, in all countries throughout the world, for all such subject matter or improvements therein, including all rights of action and damages for past infringements, the same to be held and enjoyed by Assignee for its own use and behoof, and for its legal representatives and assigns, to the full end of the term for which said Patent is granted, as fully and entirely as the same would have been held by me had this assignment not been made. I agree to sign all papers necessary to secure all said patent rights, and request issuance of all said patents to Assignee in accordance with this Assignment.

2.3.14  
Date

Scott Gammons  
Scott Gammons  
PO Box 333  
Loudon, TN 37774-5650  
Loudon County

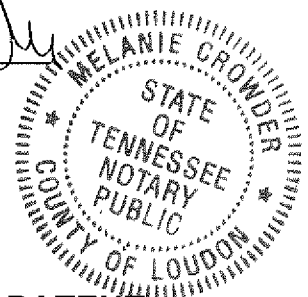
IN THE COUNTY OF Loudon )  
STATE OF Tennessee ) ss.:

I hereby certify that before me personally appeared Scott Gammons , personally known by me or showing satisfactory evidence of identification, who then and there was duly sworn by me, and who acknowledged that he executed the above instrument for the purposes therein contained on the date appearing at the foot thereof, all of which took place within my jurisdiction.

Witness my hand and seal, this 3rd day of February 2014.

Melanie Crowder  
Notary Public

My Commission Expires: 3-13-17



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2-3-14  
Date

Clifford E. Gammons  
Clifford E. Gammons  
784 Butler Drive  
Loudon, TN 37774  
Loudon County

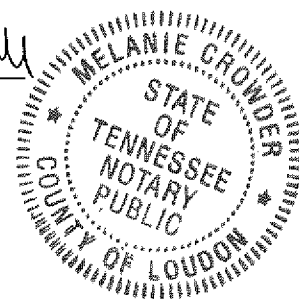
IN THE COUNTY OF Loudon )  
STATE OF Tennessee ) ss.:

I hereby certify that before me personally appeared Clifford E. Gammons , personally known by me or showing satisfactory evidence of identification, who then and there was duly sworn by me, and who acknowledged that he executed the above instrument for the purposes therein contained on the date appearing at the foot thereof, all of which took place within my jurisdiction.

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**PATENT**