

PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
ANDRE LECHOT	09/27/2002
YVES DESARZENS	09/27/2002
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State/Country:	SWITZERLAND
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	13084191
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NAME OF SUBMITTER:	DENISE A. KRAFT
SIGNATURE:	/Denise A. Kraft/
DATE SIGNED:	04/03/2014
Total Attachments: 3	
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10-25-2002

Form PTO-1585 (Rev. 03/01) OMB No. 0851-0027 (exp. 5/31/2002) Tab 50/50		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
10/08/02 RE 102261241		10/25/02 10/26/02 10/26/02	
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1. Name of conveying party(ies): LECHOT, André DESARZENS, Yves Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		2. Name and address of receiving party(ies) Name: <u>PRECIMED S.A.</u> Internal Address: _____ _____ _____ Street Address: <u>L'Echelette 7</u> _____ Zip: <u>2534</u> City: <u>ORVIN</u> - <u>SWITZERLAND</u> Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____			
Execution Date: _____			
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: _____ A. Patent Application No.(s) <u>10266442</u> B. Patent No.(s) _____ Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>John MOETTELI</u> Internal Address: <u>c/o BUGNION S.A.</u> <u>C.P. 375</u> _____ Street Address: <u>10, route de Florissant</u> _____ Zip: <u>1211</u> City: <u>GENEVA 12</u> - <u>SWITZERLAND</u>		6. Total number of applications and patents involved: <u>1</u> 7. Total fee (37 CFR 3.41).....\$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: <u>50-0800</u> (Attach duplicate copy of this page if paying by deposit account)	
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9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. <u>John MOETTELI</u> Name of Person Signing <u>[Signature]</u> Signature <u>Oct 8, 2002</u> Date Total number of pages including cover sheet, attachments, and documents: <u>3</u> Mail documents to be recorded with required cover sheet information to: Commissioner of Patents & Trademarks, Box Assignments Washington, D.C. 20231			

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- (4) ASSIGNOR hereby grants to John Moetseli, Reg. No. 35,289 and the firm of BUGNION S.A. of Geneva, Switzerland, the authority and power to insert on this instrument any further identification which may be necessary or desirable for purposes of recordation in the United States Patent Office or a Patent Office of any foreign country.

Date: X 27. 09. 02Name of Inventor 1: LECHOT, AndréSignature of Inventor 1: X *J. Lechot*Date: X 27. 09. 02Name of Inventor 2: DESARRENS, YvesSignature of Inventor 2: *Y. Desarrens*

Date: _____

Name of Inventor 3: _____

Signature of Inventor 3: _____

Wherever possible, please have two persons witness the signature of a single inventor, and at least one witness sign as having witnessed the signature of each inventor listed above:

Name: _____

Name: _____

Name: _____

Name: _____

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