

## PATENT ASSIGNMENT COVER SHEET

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<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT	
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT	
<b>CONVEYING PARTY DATA</b>		
	<b>Name</b>	<b>Execution Date</b>
	FRANCISCO RUIZ ROBLES	05/29/2014
<b>RECEIVING PARTY DATA</b>		
<b>Name:</b>	ESPECIALIDADES MEDICAS MYR, S.L.	
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<b>City:</b>	EL VENDRELL (TARRAGONA)	
<b>State/Country:</b>	SPAIN	
<b>Postal Code:</b>	E-43700	
<b>PROPERTY NUMBERS Total: 1</b>		
	<b>Property Type</b>	<b>Number</b>
	Application Number:	29491047
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<b>Fax Number:</b>		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>		
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<b>NAME OF SUBMITTER:</b>	CHARLES W. FALLOW	
<b>SIGNATURE:</b>	/Charles Fallow/	
<b>DATE SIGNED:</b>	06/05/2014	
<b>Total Attachments: 1</b>		
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**PATENT ASSIGNMENT**

I, **Francisco Ruiz Robles**, residing at C/Vidriers, Parcela 31, Pol. Ind. La Cometa, E-43700 El Vendrell (Tarragona) Spain,

for good and valuable consideration, receipt of which is hereby acknowledged,  
hereby assign to

**Especialidades Medicas Myr, S.L.** having a place of business at C/Vidriers, Parcela 31,  
Pol. Ind. La Cometa, E-43700 El Vendrell (Tarragona) Spain), my entire interest in the  
invention disclosed and claimed in an application for United States Patent, entitled


**"Apparatus and Equipment for Doctors, Hospitals and Laboratories",**

application Ser. No. **29/491047**, and in said application, any continuations or divisions  
thereof, and all patents and reissues thereof issued on said applications.

I agree to sign all papers necessary to secure all said patents and rights, and request issuance  
of all such patents to said **Especialidades Medicas Myr, S.L.**

May 29, 2014

(date)



Francisco Ruiz Robles