

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT2946020

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT	
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT	
<b>CONVEYING PARTY DATA</b>		
	<b>Name</b>	<b>Execution Date</b>
	JOHN F. ZAK	07/01/2014
<b>RECEIVING PARTY DATA</b>		
<b>Name:</b>	APTO ORTHOPAEDICS CORP.	
<b>Street Address:</b>	47 NORTH MAIN STREET	
<b>City:</b>	AKRON	
<b>State/Country:</b>	OHIO	
<b>Postal Code:</b>	44308	
<b>PROPERTY NUMBERS Total: 1</b>		
	<b>Property Type</b>	<b>Number</b>
	Application Number:	14303169
<b>CORRESPONDENCE DATA</b>		
<b>Fax Number:</b>	(330)253-8601	
<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>		
<b>Phone:</b>	330-535-5711	
<b>Email:</b>	iplaw@brouse.com	
<b>Correspondent Name:</b>	HEATHER M. BARNES	
<b>Address Line 1:</b>	388 SOUTH MAIN STREET	
<b>Address Line 2:</b>	SUITE 500	
<b>Address Line 4:</b>	AKRON, OHIO 44311-4407	
<b>ATTORNEY DOCKET NUMBER:</b>	25304.57964	
<b>NAME OF SUBMITTER:</b>	HEATHER M. BARNES	
<b>SIGNATURE:</b>	/Heather M. Barnes/	
<b>DATE SIGNED:</b>	07/21/2014	
<b>Total Attachments: 1</b>		
source=John F. Zak#page1.tif		

Filed Date: June 12, 2014