

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT3108243

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
James V. Snider	10/01/2014
David Geliebter	10/01/2014
RECEIVING PARTY DATA	
Name:	CRITICAL CARE DIAGNOSTICS, INC.
Street Address:	3030 BUNKER HILL ST., SUITE 117A
City:	SAN DIEGO
State/Country:	CALIFORNIA
Postal Code:	92109
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	29503097
CORRESPONDENCE DATA	
Fax Number:	(877)769-7945
<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>	
Phone:	(617) 542-5070
Email:	apsi@fr.com
Correspondent Name:	INDRANIL SARKAR
Address Line 1:	FISH & RICHARDSON P.C.
Address Line 2:	P.O.BOX 1022
Address Line 4:	MINNEAPOLIS, MINNESOTA 55440-1022
ATTORNEY DOCKET NUMBER:	20060-0042001
NAME OF SUBMITTER:	RITA M. LISTON
SIGNATURE:	/Rita M. Liston/
DATE SIGNED:	11/14/2014
Total Attachments: 5	
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source=20060_0042001_assign_signed#page2.tif	
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source=20060_0042001_assign_signed#page4.tif	
source=20060_0042001_assign_signed#page5.tif	

PATENT

ASSIGNMENT

For valuable consideration, the receipt of which we acknowledge, and intending to be bound legally, we, JAMES V. SNIDER, and DAVID GELIEBTER, each individually assign to CRITICAL CARE DIAGNOSTICS, INC., a corporation formed under the laws of Delaware and having a principal place of business at 3030 Bunker Hill St., Suite 117A, San Diego, California 92109, and its successors, transferees, and assignees (collectively the "Assignee"), all of our individual and joint right, title, and interest throughout the world in the subject matter (the "Subject Matter") of a patent application that names us as inventors, is titled "BLOOD TEST KIT", and was filed in the United States Patent and Trademark Office on September 23, 2014, as application 29/503,097 (the "Application").

This Assignment assigns (a) the Application and all other applications that may be made for, and all patents, utility models, design registrations, and other rights of exclusion and inventors' certificates for, any of the Subject Matter (collectively the "Applications and Granted Rights") in every country or region, (b) the right to claim priority based on and the benefit of the filing date of any of the Applications and Granted Rights under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other applicable treaties or conventions, and (c) the right to pursue, collect, and retain in the Assignee's name or otherwise, damages and any other remedies arising from any past, present, or future infringement of the Subject Matter, the Applications and Granted Rights, and any other rights assigned by this Assignment.

We authorize the Assignee to apply for and pursue protection for any or all of the Subject Matter, the Applications and Granted Rights, and any other rights assigned by this Assignment in all countries, regions, and territories of the world, in our names or in the Assignee's name.

We represent and warrant that we have the right and power to make this Assignment and that we have not made and will not make any other assignment that conflicts with this Assignment.

We will communicate to the Assignee (or at the request of the Assignee to other parties) all known facts in any form relating to the Subject Matter, will execute and provide all oaths and declarations, statements, testimony, assignments, powers of attorney, applications, and

documents, and will perform all other lawful acts necessary or desirable to secure fully to the Assignee the rights, titles, and interests assigned by this Assignment.

James V. Snider
James V. Snider

Date: Oct 1 2014

ACKNOWLEDGMENT

State of California
County of SAN DIEGO

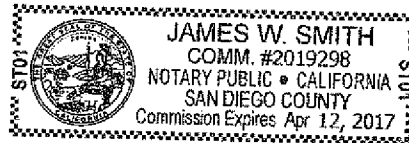
On 10/1/14 before me, JAMES W. SMITH, NOTARY PUBLIC
(insert name and title of the officer)

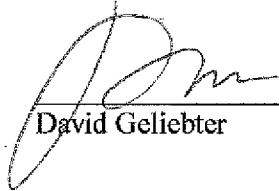
personally appeared JAMES V SNIDER
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature *[Handwritten Signature]*





David Geliebter

Date: 10/1/14_____

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by
_____.

(Signature of Notary Public-State of Florida)

(Name of Notary Typed, Printed, or Stamped)

Personally Known _____ OR Produced Identification _____
Type of Identification Produced _____

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of San Diego

On 10/1/14 before me, James W. Smith, Notary Public
(Here insert name and title of the officer)

personally appeared DAVID GELIEBTER

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) ~~is/are~~ subscribed to the within instrument and acknowledged to me that ~~he/she/they~~ executed the same in ~~his/her/their~~ authorized capacity(ies), and that by ~~his/her/their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

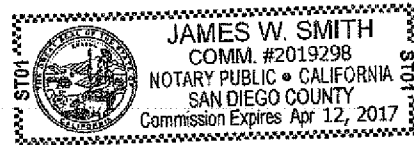
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he/she/they~~, ~~is/are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ☒ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ☒ Indicate title or type of attached document, number of pages and date.
 - ☒ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

Securely attach this document to the signed document

DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

Individual (s)

Corporate Officer

(Title)

Partner(s)

Attorney-in-Fact

Trustee(s)

Other _____

The Assignee hereby acknowledges and accepts the foregoing assignment.

Assignee: CRITICAL CARE DIAGNOSTICS, INC.

Signature: [Handwritten Signature] Date: 11/7/14

Name: James V. Snider

Title: President

ACKNOWLEDGMENT

State of California
County of SAN DIEGO

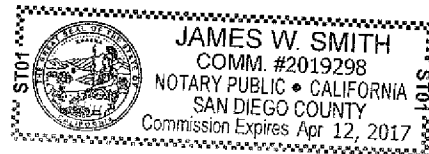
On 11/7/14 before me, JAMES W SMITH, NOTARY PUBLIC
(insert name and title of the officer)

personally appeared JAMES SNIDER
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are
subscribed to the within instrument and acknowledged to me that he/she/they executed the same in
his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the
person(s), or entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing
paragraph is true and correct.

WITNESS my hand and official seal.

Signature [Handwritten Signature]



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