

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT3119757

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	RELEASE OF SECURITY INTEREST

CONVEYING PARTY DATA

Name	Execution Date
CAMOFI MASTER LDC	10/03/2014
CAMHZN MASTER LDC	10/03/2014

RECEIVING PARTY DATA

Name:	ADVANCED CELL TECHNOLOGY, INC.
Street Address:	33 LOCKE DRIVE
City:	MARLBOROUGH
State/Country:	MASSACHUSETTS
Postal Code:	01752
Name:	MYTOGEN, INC.
Street Address:	33 LOCKE DRIVE
City:	MARLBOROUGH
State/Country:	MASSACHUSETTS
Postal Code:	01752

PROPERTY NUMBERS Total: 54

Property Type	Number
Patent Number:	6077710
Patent Number:	6110459
Patent Number:	6432711
Patent Number:	6496720
Patent Number:	6673604
Patent Number:	6680199
Patent Number:	6908704
Patent Number:	7563574
Patent Number:	7621606
Patent Number:	7696404
Patent Number:	7736896
Patent Number:	7794704
Patent Number:	7795025
Patent Number:	7838727
Patent Number:	7893315

PATENT

Property Type	Number
Patent Number:	7910369
Patent Number:	8017383
Patent Number:	8268303
Patent Number:	8597944
Patent Number:	8642328
Patent Number:	8742200
Patent Number:	8753884
Patent Number:	8796021
Application Number:	10105035
Application Number:	11842074
Application Number:	11989988
Application Number:	12322612
Application Number:	12682712
Application Number:	12700545
Application Number:	12781929
Application Number:	12787175
Application Number:	12809704
Application Number:	12856043
Application Number:	12857866
Application Number:	12991096
Application Number:	12991111
Application Number:	13006064
Application Number:	13109666
Application Number:	13190988
Application Number:	13336755
Application Number:	13432316
Application Number:	13441617
Application Number:	13447439
Application Number:	13477763
Application Number:	13510426
Application Number:	13585380
Application Number:	13587332
Application Number:	13617988
Application Number:	13653094
Application Number:	13676999
Application Number:	13691349
Application Number:	13691568
Application Number:	13721618
Patent Number:	6808704

PATENT

CORRESPONDENCE DATA**Fax Number:** (617)523-1231*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.***Phone:** 6175701000**Email:** rthomas@goodwinprocter.com**Correspondent Name:** RYAN E. THOMAS**Address Line 1:** GOODWIN PROCTER LLP**Address Line 2:** EXCHANGE PLACE, 53 STATE STREET**Address Line 4:** BOSTON, MASSACHUSETTS 02109-2881

NAME OF SUBMITTER:	RYAN E. THOMAS
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SIGNATURE:	/RET/
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DATE SIGNED:	11/24/2014
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Total Attachments: 2

source=ACT - UCC Terminations (File-Stamped) (2)#page1.tif

source=ACT - UCC Terminations (File-Stamped) (2)#page2.tif

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE
U.C.C. FILING SECTION
FILED 11:10 AM 10/03/2014
INITIAL FILING # 2013 0343914
AMENDMENT # 2014 3979028
SRV: 141254363

A. NAME & PHONE OF CONTACT AT FILER (optional) Tracey Bennett (212) 459-7136
B. E-MAIL CONTACT AT FILER (optional) tbennett@goodwinprocter.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Goodwin Procter LLP The New York Times Building 620 Eighth Avenue New York, NY 10018-1405

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
20130343914 1/26/2013

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. PARTY INFORMATION CHANGE:

Check one of these two boxes
This Change affects Debtor or Secured Party of record

AND Check one of these three boxes to:
 CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c
 ADD name: Complete item 7a or 7b, and item 7c
 DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME ADVANCED CELL TECHNOLOGY, INC.			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME			
OR 7b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral; DELETE collateral; RESTATE covered collateral; ASSIGN collateral

Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment); if this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME ADVANCED CELL TECHNOLOGY, INC.			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA:
130024.225113 Filed with: DE - Secretary of State

F# 445764
A# 630194

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

DELAWARE DEPARTMENT OF STATE
U.C.C. FILING SECTION
FILED 11:11 AM 10/03/2014
INITIAL FILING # 2013 0353095
AMENDMENT # 2014 3979085
SRV: 141254373

A. NAME & PHONE OF CONTACT AT FILER (optional) Tracey Bennett (212) 459-7136	
B. E-MAIL CONTACT AT FILER (optional) tbennett@goodwinprocter.com	
C. SEND ACKNOWLEDGMENT TO (Name and Address) Goodwin Procter LLP The New York Times Building 620 Eighth Avenue New York, NY 10018-1405	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER
20130353095 01/28/2013

1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. **PARTY INFORMATION CHANGE:**
Check one of these two boxes:
This Change affects Debtor or Secured Party of record

AND Check one of these three boxes to:
 CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c
 ADD name: Complete item 7a or 7b, and item 7c
 DELETE name: Give record name to be deleted in item 8a or 8b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME
ADVANCED CELL TECHNOLOGY, INC.

OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR 7b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8. **COLLATERAL CHANGE:** Also check one of these four boxes: ADD collateral DELETE collateral RESTATE covered collateral ASSIGN collateral

Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME
ADVANCED CELL TECHNOLOGY, INC.

OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. **OPTIONAL FILER REFERENCE DATA:**
130024.225113 Filed with: DE - Secretary of State

F#445765
A#630195

International Association of Commercial Administrators (IACA)