## 503098545 12/12/2014 PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT3145151

SUBMISSION TYPE:		NEW ASSIGNMENT	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:		ASSIGNMENT	ASSIGNMENT	
CONVEYING PARTY	' DATA			
		Name	Execution Date	
MICHAEL A. GOODE			12/08/2014	
RECEIVING PARTY	DATA			
Name:	PFIZER	PFIZER INC.		
Street Address:	235 EA	235 EAST 42ND STREET		
City:	NEW Y	NEW YORK		
State/Country:	NEW Y	NEW YORK		
Postal Code:	10017	10017		
PROPERTY NUMBE	RS Total: 1			
Property Type		Number		
		29506871		
Fax Number: <i>Correspondence wir using a fax number,</i> Phone: Email: Correspondent Nam Address Line 1: Address Line 2: Address Line 4:	Il be sent to if provided ne:	<i>; if that is unsuccessful, it will</i> 9736607648 ~ipgsmadisondocketing@pfizer.c MAUREEN P. O'BRIEN 235 EAST 42ND STREET PFIZER INC. NEW YORK, NEW YORK 10017	com	
Fax Number: <i>Correspondence will using a fax number,</i> Phone: Email: Correspondent Nam Address Line 1: Address Line 2: Address Line 4:	Il be sent to if provided ne:	<i>t; if that is unsuccessful, it will</i> 9736607648 ~ipgsmadisondocketing@pfizer.c MAUREEN P. O'BRIEN 235 EAST 42ND STREET PFIZER INC. NEW YORK, NEW YORK 10017 PC72169	<i>be sent via US Mail.</i> com	
Fax Number: Correspondence wi using a fax number, Phone: Email: Correspondent Nam Address Line 1: Address Line 2: Address Line 4: ATTORNEY DOCKET	Il be sent to if provided ne:	<i>Fif that is unsuccessful, it will</i> 9736607648 vipgsmadisondocketing@pfizer.c MAUREEN P. O'BRIEN 235 EAST 42ND STREET PFIZER INC. NEW YORK, NEW YORK 10017 PC72169 MAUREEN P. O'BRIEN	<i>be sent via US Mail.</i> com	
Fax Number: <i>Correspondence wil using a fax number,</i> Phone: Email: Correspondent Nam Address Line 1: Address Line 2: Address Line 4: ATTORNEY DOCKET NAME OF SUBMITTE SIGNATURE:	Il be sent to if provided ne:	<i>P; if that is unsuccessful, it will</i> 9736607648 ~ipgsmadisondocketing@pfizer.c MAUREEN P. O'BRIEN 235 EAST 42ND STREET PFIZER INC. NEW YORK, NEW YORK 10017 PC72169 MAUREEN P. O'BRIEN /Maureen P. O'Brien/	<i>be sent via US Mail.</i> com	
Fax Number: Correspondence wi using a fax number, Phone: Email: Correspondent Nam Address Line 1: Address Line 2: Address Line 2: Address Line 4:	Il be sent to if provided ne:	<i>Fif that is unsuccessful, it will</i> 9736607648 vipgsmadisondocketing@pfizer.c MAUREEN P. O'BRIEN 235 EAST 42ND STREET PFIZER INC. NEW YORK, NEW YORK 10017 PC72169 MAUREEN P. O'BRIEN	<i>be sent via US Mail.</i> com	

Attorney Docket No. PC72169 Application Serial No. 29/506,871 Joint Assignment

## ASSIGNMENT

For valuable consideration, the receipt and adequacy of which is hereby acknowledged, I, Michael A. GOODE, citizen of the United States of America, resident of 3992 Maidens Road, Powhatan, Virginia 23139, U.S.A.; hereby sell, assign and transfer and/or confirm the sale, assignment and transfer unto Pfizer Inc., a corporation organized and existing under the laws of Delaware, and having its principal place of business at 235 East 42<sup>nd</sup> Street, New York, New York 10017, our entire right, title and interest in and to United States Design Patent Application Serial No. 29/506,871, filed October 21, 2014, having PFIZER Docket No. PC72169, and entitled ORAL DELIVERY PRODUCT DESIGN; our entire right, title and interest, in all countries of the world, in and to all our inventions, whether joint or sole, disclosed in said Design Patent Application; our entire right, title and interest in and to all patent applications filed for Letters Patent for any or all of said inventions; our entire right, title and interest in and to all Letters Patent granted on said patent applications; and the right to claim priority from said Design Patent Application under the Paris Convention for the Protection of Industrial Property, and under any and all other such treaties and agreements to which the United States of America is a party and which afford similar priority-claiming privileges, in all countries of the world;

and we hereby agree and/or confirm the agreement, whenever requested, to communicate to said Pfizer Inc. and its successors and assigns, any facts known to us respecting said inventions, to testify in any legal proceeding respecting said inventions, and to execute all applications or papers necessary to obtain and maintain proper patent protection on said inventions in all countries of the world.

1 of 3

Attorney Docket No. PC72169 Application Serial No. 29/506,871 Joint Assignment

Signed and witnessed this <u>08</u> day of <u>Dec</u> 2014 at

Uhas A/Soo By:

Michael A. Goode

## CERTIFICATE OF ACKNOWLEDGMENT

Commonwealth of Virginia

County of Werred

(Seal)

The foregoing instrument was acknowledged before me, \_ <u>loldenhous</u>this <u>8th</u>

day of December, 2014

(Signature of Person Taking Acknowledgement )(Title or Rank)

Lynn Moldenhauer NOTARY PUBLIC Commonwealth of Virginia Reg. #7504342 Commission Expires January 31, 2015

Notary's Registration Number: 7504342

Attorney Docket No. PC72169 Application Serial No. 29/506,871 Joint Assignment

Signed and witnessed this \_\_\_\_ day of Declule, 2014 at \_\_ Modin, Mf.

Pfizer Inc.

By:

Jeffrey M. Gold Assistant General Counsel **Duly Authorized** 

State of New Jersey

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CERTIFICATE OF ACKNOWLEDGMENT

County of

Morris

On <u>Detember</u> 11, 20<u>14</u> before me, <u>Kari E. Clay Fun</u>, Notary Public in and for (Notary's Name) said county, personally appeared <u>Jeffrey M. Gold</u>, (Signer/Witness)

who has satisfactorily identified himself as the signer to the above-referenced document.

Kari E. Clayton

(Affix Notary Stamp Here)

My Commission Expires 09/21/2016

otary Signature)

<u>eyfur December 11,</u>2014 re) (Date)

**KARI E. CLAYTON** NOTARY PUBLIC OF NEW JERSEY I.D. # 2412603 My Commission Expires 9/21/2016

**RECORDED: 12/12/2014** 

3 of 3