

PATENT ASSIGNMENT COVER SHEET

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EPAS ID: PAT3158111

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Konstantina Stankovic	08/27/2014
RECEIVING PARTY DATA	
Name:	MASSACHUSETTS EYE & EAR INFIRMARY
Street Address:	243 CHARLES STREET
City:	BOSTON
State/Country:	MASSACHUSETTS
Postal Code:	02114
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14354690
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:	PETER POULIN
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Address Line 2:	P.O.BOX 1022
Address Line 4:	MINNEAPOLIS, MINNESOTA 55440-1022
ATTORNEY DOCKET NUMBER:	00633-0123US1
NAME OF SUBMITTER:	CHRISTINE M. GRACE
SIGNATURE:	/Christine M. Grace/
DATE SIGNED:	12/22/2014
Total Attachments: 3	
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ASSIGNMENT

For valuable consideration, the receipt of which I acknowledge, and intending to be bound legally, I, KONSTANTINA STANKOVIC, assign to MASSACHUSETTS EYE & EAR INFIRMARY, a corporation formed under the laws of Massachusetts and having a principal place of business at 243 Charles Street, Boston, Massachusetts 02114, and its successors, transferees, and assignees (collectively the "Assignee"), all of my right, title, and interest throughout the world in the subject matter (the "Subject Matter") of a patent application that names me as inventor, is titled "TISSUE AND CELLULAR IMAGING", and was filed in the United States Patent and Trademark Office on April 28, 2014, as application 14/354,690 (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.

I 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 my name or in the Assignee's name.

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

I 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.

Konstantina Stankovic

DATE: 8/27/2014

Konstantina Stankovic

The Commonwealth of Massachusetts



ss.

On this _____ day of _____, 20____, before me, the undersigned officer, personally appeared _____, proved to me through evidence of identification, to wit: _____, to be the person(s) whose name(s) is/are signed on the attached document, and who acknowledged to me that _____ signed it voluntarily for its stated purpose.

Notary Public

The Assignee hereby acknowledges and accepts the foregoing assignment.

Assignee: MASSACHUSETTS EYE & EAR INFIRMARY

Signature: [Handwritten Signature] Date: 12/16/2014

Name: Ojas P. Mehta, JD
Director, Intellectual Property

Title: & Commercial Ventures

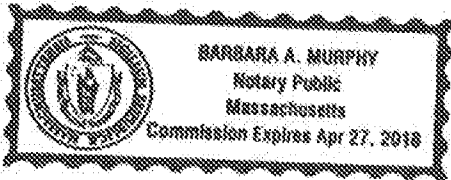
The Commonwealth of Massachusetts

Suffolk ss.



On this 16 day of December, 2014 before me, the undersigned officer, personally appeared Ojas Mehta, proved to me through evidence of identification, to wit: MEEI ID Card, to be the person(s) whose name(s) is/are signed on the attached document, and who acknowledged to me that he signed it voluntarily for its stated purpose.

[Handwritten Signature]
Notary Public



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