PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
BAS LUDOPH	02/02/2015

RECEIVING PARTY DATA

Name:	WELLINQ MEDICAL B.V.	
Street Address:	KAMERLINGH-ONNESSTRAAT 5	
City:	LEEK	
State/Country:	NETHERLANDS	
Postal Code:	9351 VD	

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	14419726

CORRESPONDENCE DATA

Fax Number: (412)945-5933

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.

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ATTORNEY DOCKET NUMBER:	0702-150330	
NAME OF SUBMITTER:	RICHARD L. BYRNE	
SIGNATURE:	/richard I byrne/	
DATE SIGNED:	02/05/2015	

Total Attachments: 3

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PATENT 503166941 REEL: 034895 FRAME: 0707

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OMB No. 0651-0027	(exp 4/30/2015)

U.S. DEPARTMENT OF COMMERCE United States Patent and Trademark Office

	ORM COVER SHEET TS ONLY
	se record the attached documents or the new address(es) below.
1. Name of conveying party(ies) Bas LUDOPH	Name and address of receiving party(ies) Name: WELLINQ MEDICAL B.V. Internal Address:
Additional name(s) of conveying party(ies) attached? Yes No. 3. Nature of conveyance/Execution Date(s): Execution Date(s) February 2, 2015 Assignment Merger Security Agreement Change of Name Joint Research Agreement Government Interest Assignment Executive Order 9424, Confirmatory License Other 4. Application or patent number(s): This A. Patent Application No.(s)	Street Address: Kamerlingh-Onnesstraat 5 City: Leek State: Zip: 9351 VD Additional name(s) & address(es) attached? Yes No document is being filed together with a new application. B. Patent No.(s)
Additional numbers at 5. Name and address to whom correspondence concerning document should be mailed:	6. Total number of applications and patents involved: 1
Name: Richard L. Byrne	7. Total fee (37 CFR 1.21(h) & 3.41) \$ 0
Internal Address: The Webb Law Firm	Authorized to be charged by credit card Authorized to be charged to deposit account
Street Address: One Gateway Center 420 Ft. Duquesne Blvd., Ste 1200	Enclosed None required (government interest not affecting title)
City: Pittsburgh	8. Payment Information a. Credit Card Last 4 Numbers
State: <u>PA</u> Zip: <u>15222</u>	Expiration Date
Phone Number: 412-471-8815 Fax Number: 412-945-5933 Email Address: assignments@webblaw.com	b. Deposit Account Number
9. Signature: Whand h () have	February 5, 2015
Richard L. Byrne Name of Person Signing	Total number of pages including cover sheet, attachments, and documents:

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A. 22313-1450

Doc. No. 2XM2413

	INTERNATIONAL No
Attorney Docket No	

Attorney Docket No. <u>07/02-150330</u>
ASSIGNMENT
WHEREAS, as a below named inventor, I have invented certain new and useful improvements in
PRESSURE SENSOR CATHETER AND ASSOCIATED METHOD
(Invention Title)
for which I have this day executed an application for a United States Patent (hereinafter "said application").
AND/OR
for which an application for a United States Patent was filed on(mm/dd/yyyy) and bears Application Number (hereinafter "said application"). AND/OR
for which an international patent application was filed under the Patent Cooperation Treaty on 08/06/2013 (mm/dd/yyyy), bearing Application No. PCT/NL2013/050582 (hereinafter "said application").
AND, WHEREAS, Welling Medical B.V., a corporation of The Netherlands, having a place of business at Kamerlingh-Onnesstraat 5, 9351 VD Leek, The Netherlands, hereinafter called the "assignee", is desirous of acquiring the entire right, title, and interest in and to said application and the inventions and improvements therein disclosed.
NOW, THEREFORE, for good and valuable consideration paid to me by said assignee, the receipt of which is hereby acknowledged, I as the inventor or as one of the inventors, hereinafter the assignor(s), do hereby assign, sell and transfer unto said assignee the full and exclusive right, title and interest in and to said application and the inventions and improvements therein disclosed for the United States and all foreign countries and any Letters Patent which may issue therefor in the United States and all foreign countries and all divisions, reissues, continuations, continuations-in-part, renewals and/or extensions thereof. Such assignment extends to the full ends of the terms of these applications and patents as fully and entirely as the same would have been held and enjoyed by me had this Assignment not been made.
I hereby authorize and request any attorney associated with The Webb Law Firm, Customer No. 28289, to insert here in parentheses (Application No. $14/419,726$, filed $08/06/2013$) the filing date and application number of said application when known.
I covenant that I am the lawful owner(s) of said application, inventions and improvements, that the same are unencumbered, that no license has been granted to make, use or vend the said inventions or improvements or any of them, and that I have the full right to make

this Assignment.

	NTERNATIONAL
Application 1	No
Attorney Docket No.	0702-150330

And for the consideration aforesaid, I agree individually and, if applicable, jointly that I will communicate to said assignee or the representatives thereof any facts known to me respecting said inventions and improvements, and will, upon request but without expense to me, testify in any legal proceedings, sign all lawful papers, execute all divisional, reissue, continuation, continuation-in-part, renewal and/or extension applications, make all rightful oaths, and generally do all other and further lawful acts deemed necessary or expedient by said assignee or by counsel for said assignee to assist or enable said assignee to obtain and enforce full benefits from the rights and interests herein assigned. This Assignment shall be binding upon my heirs, executors, administrators and/or assigns, and shall inure to the benefit of the heirs, executors, administrators, successors and/or assigns, as the case may be, of said assignee.

1. FULL NAME OF ASSIGNOR: Bas LUDOPH	RESIDENCE: Leek, The Netherlands
EXECUTED this 2 day of feb	
WITNESS:	Signature
WIIIIEBD,	<u> </u>