

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT3250022

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT	
NATURE OF CONVEYANCE:	Corrective Assignment to correct the LAST NAME OF THE INVENTOR previously recorded on Reel 018332 Frame 0595. Assignor(s) hereby confirms the SPELLING OF THE INVENTOR'S LAST NAME FROM JOCHLE TO JÖCHLE, WITH AN UMLAUT.	
CONVEYING PARTY DATA		
	Name	Execution Date
	KNUT JÖCHLE	08/29/2006
RECEIVING PARTY DATA		
Name:	MAP MEDIZIN-TECHNOLOGIE GMBH	
Street Address:	FRAUNHOFERSTRASSE 16	
City:	MARTINSRIED	
State/Country:	GERMANY	
Postal Code:	82152	
PROPERTY NUMBERS Total: 1		
	Property Type	Number
	Patent Number:	8839786
CORRESPONDENCE DATA		
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<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>		
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ATTORNEY DOCKET NUMBER:	4398-1518	
NAME OF SUBMITTER:	IAN G. SCHUTTER	
SIGNATURE:	/Ian G. Schutter/	
DATE SIGNED:	03/04/2015	
Total Attachments: 3		
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09-29-2006



Our Ref.: 4750-53

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To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or copy thereof.

<p>1. Name of conveying party(ies): 1 Knut JOCHLE 2 3 4</p> <p>Additional name/s of conveying party/ies attached? <input type="checkbox"/></p> <p>3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Assignment <input type="checkbox"/> Change of Name <input type="checkbox"/> Other</p> <p>Execution Date: August 29, 2006</p>		<p>2. Name and address of receiving party(ies):</p> <p>Name: MAP Medizin-Technologie GmbH Internal Address: Street Address: Fraunhoferstrasse 16 City: Martinsried State/Country: Germany Zip: 82152</p> <p>Additional name/s & address/es attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>4. Application number(s) or patent number(s): <input type="checkbox"/> This application is being filed together with a new application. A. Patent Application No(s). (1) 11/480,568 (2) (3) B. Patent No(s). (1) (2) (3) Additional numbers attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		
<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: Paul T. Bowen Internal Address: Street Address: Nixon & Vanderhye P.C. 901 North Glebe Road 11th Floor City: Arlington State: VA Zip: 22203</p>	<p>6. Total number of applications & patents involved: 1</p> <p>7. Total fee (37 CFR 3.41) \$ 40.00 <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Authorized to be charged to deposit account #14-1140</p> <p>8. The Commissioner is hereby authorized to charge any deficiency in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper thereafter filed in this application by this firm) to our Account No. 14-1140.</p>	

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9. Statements and signature.
To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Paul T. Bowen Name of Person Signing Reg. No. 38,009	 Signature	September 26, 2006 Date
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Total number of pages including original cover sheet, attachments, and document: [2]

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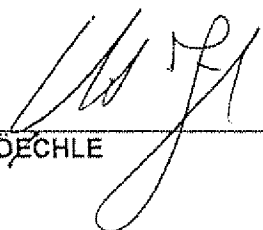
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CONFIRMATION OF ASSIGNMENT

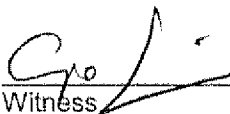
Inventors to MAP GmbH

WHEREAS, I, Knut JOECHLE of Brunnenstrasse 39a, DE-86938 Schondorf, Germany, hereby confirm, that I have assigned my partial right, title and interest in the Invention identified in the United States Patent Office as Patent Application Serial No 11/480568 filed on July, 5, 2006, titled APPARATUS FOR PUMPING A BREATHING GAS, and any and all continuation, divisional, renewal or substitute thereof and corresponding international applications, foreign applications and regional applications, to MAP Medizin-Technologie GmbH pursuant to the agreement, being my contract of employment, and for good and valuable consideration the receipt of which is hereby acknowledged.

IN WITNESS WHEREOF, we have hereunto set our hands on the date indicated below.


Knut JOECHLE

29.8.06
Date Signed


Witness

Name: Anja Gleixner

For and on behalf of
MAP Medizin-Technologie GMBH

By: 

Title: Dr. Jürgen P. Rassat-von Mallinckrodt
CEO

Date: 31 August 2006