

04/10/2015



103671902

4-9-15

To the Director of the U.S. Patent and Trademark Office

documents or the new address(es) below.

**1. Name of conveying party(ies)**

KENNETH P. GLYNN

Additional name(s) of conveying party(ies) attached? ☒ Yes ☐ No

**3. Nature of conveyance/Execution Date(s):**

Execution Date(s) OCTOBER 15, 2013

- ☒ Assignment ☐ Merger  
☐ Security Agreement ☐ Change of Name  
☐ Joint Research Agreement  
☐ Government Interest Assignment  
☐ Executive Order 9424, Confirmatory License  
☐ Other \_\_\_\_\_

**2. Name and address of receiving party(ies)**

Name: CLOVER HILL HEALTHCARE, INC.

Internal Address: \_\_\_\_\_

Street Address: 121 ROUTE 31, SUITE 600

City: FLEMINGTON

State: NEW JERSEY

Country: USA Zip: 08822

Additional name(s) & address(es) attached? ☐ Yes ☒ No

**4. Application or patent number(s):**

A. Patent Application No.(s)

13/507,112 (Docket No. GTI-133A)

☐ This document serves as an Oath/Declaration (37 CFR 1.63).

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

**5. Name and address to whom correspondence concerning document should be mailed:**

Name: DEIRDRA M. MEAGHER, ESQ.

Internal Address: \_\_\_\_\_

Street Address: 121 ROUTE 31, SUITE 600

City: FLEMINGTON

State: NEW JERSEY Zip: 08822

Phone Number: 908-788-0077

Docket Number: GTI-133A

Email Address: inventionsunlimited@yahoo.com

**6. Total number of applications and patents involved:** ONE

**7. Total fee (37 CFR 1.21(h) & 3.41)** \$ 40.00

- ☐ Authorized to be charged to deposit account  
☒ Enclosed  
☐ None required (government interest not affecting title)

**8. Payment Information**

Deposit Account Number \_\_\_\_\_

04/14/2015 DTIMBERL 00000016 13307112

Authorized User Name \_\_\_\_\_

01 FC:0021

40.00 00

**9. Signature:**

Deirdra M Meagher, Esq  
Signature

7 April 2015

Date

DEIRDRA M. MEAGHER, ESQ.

Name of Person Signing

Total number of pages including cover sheet, attachments, and documents: 2

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

# ASSIGNMENT OF APPLICATION

Docket Number GTI-133A

Whereas, I/We, KENNETH P. GLYNN of 29 PLENNERT ROAD, FLEMINGTON, NJ 08822 hereafter, referred to as applicants, have invented certain new and useful improvements in INTRAOCULAR LENS IMPLANT ALIGNMENT METHODS AND DEVICES.

   I for which an application for a United States Patent was filed on 06 JUNE 2012

Application Number 13/507,112

Whereas, CLOVER HILL HEALTHCARE, INC. herein referred to "assignee" whose mailing address is 121 State Route 31, Suite 600, Flemington, NJ, 08822 desirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of ten dollars (\$10.00), are other valuable consideration, the receipt whereof is acknowledged, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign and transfer unto said assignee the full and exclusive right to the said invention in the United States and the entire right, title and interest in and to any and all Patents which may be granted therefor in the United States, I/We hereby authorize and request the Commissioner of Patent and Trademarks to issue said United States Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof, and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

Executed this 15th day of October, 2013

At Flemington, N J 08822

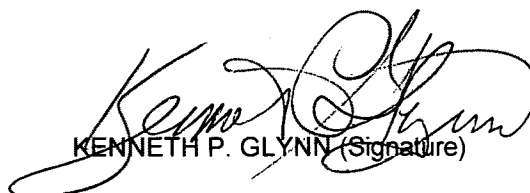
State of New Jersey        )

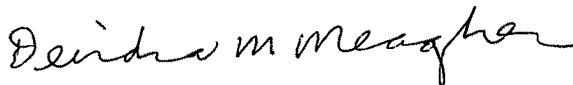
SS:

County of Hunterdon        )

Before me personally appeared said Kenneth P. Glynn  
and acknowledged the foregoing instrument to be his free act and deed this 15th  
day of October, 2013.

Seal

  
KENNETH P. GLYNN (Signature)



Deirdra M. Meagher, Esquire

(Attorney at law of State of New Jersey-A Authority to Notarize concurrent with license to practice)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, See below\*.

\* D Total of forms are submitted.

This form offers a sample or suggested format for an assignment document. This sample form is not an OMB officially approved form.