

PATENT ASSIGNMENT COVER SHEET

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 Stylesheet Version v1.2

EPAS ID: PAT3338149

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
BRIAN CORNBLATT	02/05/2015
GRACE CORNBLATT	02/05/2015
ANTON BZHELYANSKY	02/27/2015
ROBERT HENDERSON	04/23/2015
RECEIVING PARTY DATA	
Name:	NUTRAMAX LABORATORIES, INC.
Street Address:	2208 LAKESIDE BOULEVARD
City:	EDGEWOOD
State/Country:	MARYLAND
Postal Code:	21040
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14412176
CORRESPONDENCE DATA	
Fax Number:	(202)857-6395
<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:	2028576000
Email:	patentdocket@arentfox.com
Correspondent Name:	ARENT FOX LLP
Address Line 1:	1717 K STREET, NW
Address Line 4:	WASHINGTON, D.C. 20006
ATTORNEY DOCKET NUMBER:	031026.00604
NAME OF SUBMITTER:	NATASHA BROWN
SIGNATURE:	/Natasha Brown/
DATE SIGNED:	05/04/2015
Total Attachments: 4	
source=031026.00604_Executed Assignment#page1.tif	
source=031026.00604_Executed Assignment#page2.tif	
source=031026.00604_Executed Assignment#page3.tif	

Docket No. 031026.00604**U.S. ASSIGNMENT**

IN CONSIDERATION of the sum of One Dollar (\$1.00), and of other good and valuable consideration paid to the undersigned inventor(s) (hereinafter ASSIGNOR) by

{Insert
ASSIGNEE's
Name(s)
Address(es)}

NUTRAMAX LABORATORIES, INC.**2208 Lakeside Boulevard****Edgewood, MD 21040**

(hereinafter ASSIGNEE), the receipt of which is hereby acknowledged, the undersigned ASSIGNOR hereby sells, assigns and transfers to ASSIGNEE the entire and exclusive right, title and interest, including the right to sue for past infringement, if any, and all rights pursuant to 35 U.S.C. §154, to the invention entitled

{Title of
Invention}

**COMPOSITIONS COMPRISING SULFORAPHANE OR A SULFORAPHANE PRECURSOR
AND A MILK THISTLE EXTRACT OR POWDER**

{*If the assignment
is being filed
after the filing of the
application, this
section must be
completed}

for which application for Letters Patent of the United States was executed on even date herewith unless otherwise indicated below:

filed on **December 30, 2014**, Serial No. **14/412,176**
(Arent Fox LLP is hereby authorized to insert the series code, serial number and/or filing date hereon, when known)

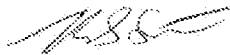
and all Letters Patent of the United States to be obtained therefor on said application or any continuation, division, renewal, substitute, reissue or reexamination thereof, and any other application claiming priority thereto, for the full term or terms for which the same may be granted.

The ASSIGNOR agrees to execute all papers necessary in connection with application and any continuing, divisional, reissue or reexamination applications thereof and also to execute separate assignments in connection with such applications as the ASSIGNEE may deem necessary or expedient.

The ASSIGNOR agrees to execute all papers necessary in connection with any interference, litigation, or other legal proceeding which may be declared concerning this application or any continuation, division, reissue or reexamination thereof or Letters Patent or reissue patent issued thereon and to cooperate with the ASSIGNEE in every way possible in obtaining and producing evidence and proceeding with such interference, litigation, or other legal proceeding.

IN WITNESS WHEREOF, the undersigned inventor(s) has (have) affixed his/her/their signature(s).

{Signature(s)
of Assignor(s)}



(SIGNATURE)

Brian CORNB�ATT

(TYPE NAME)

2/5/15

(DATE)

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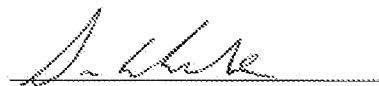
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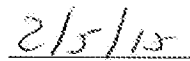
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[Signature(s)
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(SIGNATURE)

Grace CORNBLATT
(TYPE NAME)



(DATE)

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[Signature(s)
of Assignor(s)]

(SIGNATURE)

Brian CORNBLATT

(TYPE NAME)

(DATE)

(SIGNATURE)

Grace CORNBLATT

(TYPE NAME)

(DATE)

(SIGNATURE)

Anton BZHELYANSKY

(TYPE NAME)

(DATE)

(SIGNATURE)

Robert HENDERSON

(TYPE NAME)

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_____ (SIGNATURE)	Grace CORNBLATT (TYPE NAME)	_____ (DATE)
_____ (SIGNATURE)	Anton BZHELYANSKY (TYPE NAME)	_____ (DATE)
 (SIGNATURE)	Robert HENDERSON (TYPE NAME)	<u>4/23/15</u> (DATE)