

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT3358889

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
JAMES S. CUNNINGHAM	02/26/2010
ERIC JONES	02/26/2010
RECEIVING PARTY DATA	
Name:	TYCO HEALTHCARE GROUP LP
Street Address:	5920 LONGBOW DRIVE
City:	BOULDER
State/Country:	COLORADO
Postal Code:	80301-3299
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14715718
CORRESPONDENCE DATA	
Fax Number:	(303)581-6632
<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:	303-530-6138
Email:	SurgicalUS@covidien.com
Correspondent Name:	COVIDIEN LP ATTN: IP LEGAL
Address Line 1:	5920 LONGBOW DRIVE
Address Line 2:	MAIL STOP A36
Address Line 4:	BOULDER, COLORADO 80301-3299
ATTORNEY DOCKET NUMBER:	H-US-02058CON2
NAME OF SUBMITTER:	THOMAS A. BEATON
SIGNATURE:	/Thomas A. BEATON/ Reg. #46543
DATE SIGNED:	05/19/2015
Total Attachments: 4	
source=finalassignment#page1.tif	
source=finalassignment#page2.tif	
source=finalassignment#page3.tif	
source=finalassignment#page4.tif	

For: U.S. and/or Foreign Rights
For: U.S. Application or U.S. Patent
By : Inventor(s) or Present Owner

ASSIGNMENT OF INVENTION

In consideration of the payment by ASSIGNEE to ASSIGNORS of the sum of One Dollar (\$1.00), the receipt of which is hereby acknowledged, and for other good and valuable consideration,
ASSIGNORS:

**James S. Cunningham
Eric Jones**

(If assignment is by person or entity to whom invention was previously assigned and this was recorded in PTO add the following)

Recorded on: _____
Reel _____
Frame _____

hereby sells, assigns and transfers to

ASSIGNEE:

TYCO Healthcare Group LP
(Type or print name of ASSIGNEE)
Address
5920 Longbow Drive
Boulder, CO 80301-3299
U.S.A.
Nationality

and the successors, assigns and legal representatives of the ASSIGNEE

the entire right, title and interest

an undivided _____ percent (_____ %) interest for the United States and its territorial possessions

and in all foreign countries, including all rights to claim priority, the right to sue for present, past and future infringement, in the United States, its territorial possessions, and in all foreign countries, including all treaty and convention rights in and to the invention and any and all improvements entitled:

DE-TENSIONING MECHANISM FOR ARTICULATION DRIVE CABLES
(title of invention)

and which is found in

- (a) U.S. patent application executed on even date herewith.
- (b) U.S. patent application executed on _____.
- (c) U.S. application Serial No. _____ filed on _____.
- (d) U.S. provisional application No. _____
filed on _____.
- (e) U.S. Patent No. _____ issued _____.
- (f) PCT application No. _____
filed on _____.
- A change of address to which correspondence is to be sent
regarding patent maintenance fees is being sent
separately.

- (g) and any legal equivalent thereof in a foreign country, including the right to claim priority and, in and to, all Letters Patent to be obtained for said invention by the above application or any continuation, continuation-in-part, divisional, renewal, or substitute thereof, and as to letters patent any reissue or re-examination thereof

ASSIGNORS hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment;

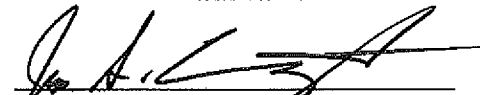
ASSIGNORS hereby authorizes and requests the Commissioner of Patents and Trademarks to issue all such Letters Patent to ASSIGNEE:

ASSIGNORS further covenants to promptly provide all pertinent facts and documents known and accessible to ASSIGNORS relating to said invention and said Letters Patent and legal equivalents; to testify as to the same in any interference, litigation or proceeding related thereto; to execute and deliver any and all papers that may be necessary or desirable to perfect the title to said invention or any Letters Patents which may be granted therefor in said ASSIGNEE, its successors, assigns or other legal representatives; to execute any additional or divisional applications for patents for said invention, or any part or parts thereof, and for the reissue of any Letters Patents to be granted therefor; and to make all rightful oaths and do all lawful acts requisite for procuring the same or for aiding therein, all without further compensation, but at the sole expense of ASSIGNEE, its successors, assigns, or other legal representatives.

ASSIGNORS hereby grants ASSIGNEE and Assignee's attorneys the power to insert the Serial No. and/or filing date of the above-described application(s) after such information becomes known to them.

IN WITNESS WHEREOF, I/We have hereunto set hand and seal.

WARNING: Date of signing must be the same as the date of execution of the application if item (a) was checked above.



James S. Cunningham

2-26-10

Dated



Eric Jones

2/26/10

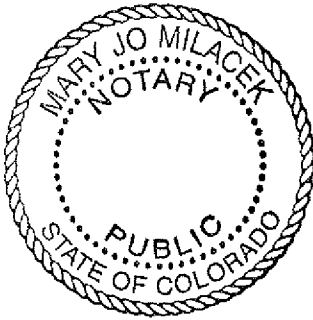
Dated

[X] Notarization or Legalization Page Added.

State of Colorado)
County of Boulder) ss

Before me this 26 day of February 2010,

personally appeared **James S. Cunningham** to me personally known to be the person described in and who executed the above instrument, and acknowledged to me that he/she executed the same of his own free will for the purposes therein set forth.



AFFIX SEAL

My Commission Expires 02/28/2011

Mary Jo Milacek
Notary Public

State of California)
County of Alameda) ss

Before me this ___ day of _____ 2010,

personally appeared **Eric Jones** to me personally known to be the person described in and who executed the above instrument, and acknowledged to me that he/she executed the same of his own free will for the purposes therein set forth.

Notary Public

AFFIX SEAL

* see Attach copy for Notary.

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Alameda

On 2/26/2010 before me, Megha D. Patel, Notary Public,
(Here insert name and title of the officer)

personally appeared Eric Jones

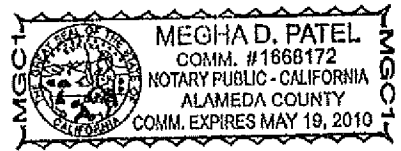
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

M Patel
Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Assignment of Invention
(Title or description of attached document)

H- US- 02058 (203-706A)
(Title or description of attached document continued)

Number of Pages _____ Document Date _____

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
 Corporate Officer

(Title)

- Partner(s)
 Attorney-in-Fact
 Trustee(s)
 Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is/are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document