

PATENT ASSIGNMENT COVER SHEET

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EPAS ID: PAT3410081

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
John Arrizza	06/08/2015
RECEIVING PARTY DATA	
Name:	FRESENIUS MEDICAL CARE HOLDINGS, INC.
Street Address:	920 WINTER STREET
City:	WALTHAM
State/Country:	MASSACHUSETTS
Postal Code:	02451-1457
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14640364
CORRESPONDENCE DATA	
Fax Number:	(877)769-7945
<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:	(617) 542-5070
Email:	apsi@fr.com
Correspondent Name:	JAMES H. RICHARD
Address Line 1:	FISH & RICHARDSON P.C.
Address Line 2:	P.O.BOX 1022
Address Line 4:	MINNEAPOLIS, MINNESOTA 55440-1022
ATTORNEY DOCKET NUMBER:	18196-0218001
NAME OF SUBMITTER:	MATTHEW G. DOHERTY
SIGNATURE:	/Matthew G. Doherty/
DATE SIGNED:	06/24/2015
Total Attachments: 2	
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ASSIGNMENT

For valuable consideration, the receipt of which I acknowledge, and intending to be bound legally, I, JOHN ARRIZZA, assign to FRESENIUS MEDICAL CARE HOLDINGS, INC., a corporation formed under the laws of York and having a principal place of business at 920 Winter St., Waltham, MA 02451-1457, and its successors, transferees, and assignees (collectively the "Assignee"), all of my right, title, and interest throughout the world in the subject matter (the "Subject Matter") of a patent application that names me as inventor, is titled "ASSOCIATING DIALYSIS ACCESSORIES USING NEAR FIELD COMMUNICATION", and was filed in the United States Patent and Trademark Office on March 6, 2015, as application 14/640,364 (the "Application").

This Assignment assigns (a) the Application and all other applications that may be made for, and all patents, utility models, design registrations, and other rights of exclusion and inventors' certificates for, any of the Subject Matter (collectively the "Applications and Granted Rights") in every country or region, (b) the right to claim priority based on and the benefit of the filing date of any of the Applications and Granted Rights under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other applicable treaties or conventions, and (c) the right to pursue, collect, and retain in the Assignee's name or otherwise, damages and any other remedies arising from any past, present, or future infringement of the Subject Matter, the Applications and Granted Rights, and any other rights assigned by this Assignment.

I authorize the Assignee to apply for and pursue protection for any or all of the Subject Matter, the Applications and Granted Rights, and any other rights assigned by this Assignment in all countries, regions, and territories of the world, in my name or in the Assignee's name.

I represent and warrant that I have the right and power to make this Assignment and that I have not made and will not make any other assignment that conflicts with this Assignment.

I will communicate to the Assignee (or at the request of the Assignee to other parties) all known facts in any form relating to the Subject Matter, will execute and provide all oaths and declarations, statements, testimony, assignments, powers of attorney, applications, and documents, and will perform all other lawful acts necessary or desirable to secure fully to the Assignee the rights, titles, and interests assigned by this Assignment.

John Arrizza
John Arrizza

DATE: June 8/2015

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of _____)

On _____ before me, _____
(insert name and title of the officer)

personally appeared _____
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 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.

Signature _____

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