

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT3441944

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT	
NATURE OF CONVEYANCE:	Corrective Assignment to correct the CONVEYING PARTY DATA ON ASSIGNMENT COVER SHEET FROM ROB SOBIE TO ROBERT ANDREW SOBIE previously recorded on Reel 022967 Frame 0820. Assignor(s) hereby confirms the ASSIGNMENT.	
CONVEYING PARTY DATA		
	Name	Execution Date
	ROBERT ANDREW SOBIE	07/10/2009
RECEIVING PARTY DATA		
Name:	CARDINAL HEALTH 303, INC.	
Street Address:	3750 TORREY VIEW COURT	
City:	SAN DIEGO	
State/Country:	CALIFORNIA	
Postal Code:	92130	
PROPERTY NUMBERS Total: 1		
Property Type	Number	
Application Number:	12327623	
CORRESPONDENCE DATA		
Fax Number:	(949)851-9348	
<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:	(949) 851-0633	
Email:	aespinoza@mwe.com, mweipdocket@mwe.com	
Correspondent Name:	M. TODD HALES	
Address Line 1:	MCDERMOTT WILL & EMERY LLP	
Address Line 2:	4 PARK PLAZA, SUITE 1700	
Address Line 4:	IRVINE, CALIFORNIA 92614-2559	
ATTORNEY DOCKET NUMBER:	047145-0783	
NAME OF SUBMITTER:	M. TODD HALES, REG. NO. 60,472	
SIGNATURE:	/M. Todd Hales/	
DATE SIGNED:	07/16/2015	
Total Attachments: 4		
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PATENT ASSIGNMENT

Electronic Version v1.1
Stylesheet Version v1.1

07/16/2009
500912691

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
Rob SOBIE	07/10/2009
RECEIVING PARTY DATA	
Name:	Cardinal Health 303, Inc.
Street Address:	3750 Torrey View Court
City:	San Diego
State/Country:	CALIFORNIA
Postal Code:	92130
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	12327623
CORRESPONDENCE DATA	
Fax Number:	(858)720-7800
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	(858)720-3300
Email:	sswedo@mwe.com
Correspondent Name:	McDermott Will & Emery LLP
Address Line 1:	11882 El Camino Real, Suite 400
Address Line 4:	San Diego, CALIFORNIA 92130
ATTORNEY DOCKET NUMBER:	047145-0783
NAME OF SUBMITTER:	John A. Hankins
Total Attachments: 4 source=047145_0783_Recording_Form_Cover_Sheet_16Jul2009#page1.tif source=047145_0783_Assignment_and_Acknowledgment_16Jul2009#page1.tif source=047145_0783_Assignment_and_Acknowledgment_16Jul2009#page2.tif source=047145_0783_Assignment_and_Acknowledgment_16Jul2009#page3.tif	

CH \$40.00 12327623

Atty. Dkt. No.: 047145-0783

ASSIGNMENT

WHEREAS I, Robert Andrew SOBIE of 11732 Wills Creek Road, San Diego, California 92131 have made a certain new and useful invention as set forth in an application for United States Letters Patent, entitled METHOD AND APPARATUS FOR INVENTORY CONTROL IN MEDICAL TREATMENT AREAS filed December 3, 2008, and identified by United States Application No. 12/327,623;

AND WHEREAS, Cardinal Health 303, Inc., a corporation of the State of Delaware and having an address of 3750 Torrey View Court, San Diego, California 92130 is desirous of acquiring the entire right, title and interest in and to said invention and in and to any and all Letters Patent of the United States and foreign countries which may be obtained therefor;

NOW, THEREFORE, for good and valuable consideration, the receipt for and sufficiency of which is hereby acknowledged, I do hereby sell, assign, transfer and set over unto Cardinal Health 303, Inc., its legal representatives, successors, and assigns, the entire right, title and interest in and to said invention as set forth in the above-mentioned application, including the right of priority and including any continuations, continuations-in-part, divisions, reissues, re-examinations or extensions thereof, and in and to any and all patents of the United States and foreign countries which may be issued for said invention;

UPON SAID CONSIDERATIONS, I hereby agree with the said assignee that I will not execute any writing or do any act whatsoever conflicting with these presents, and that I will, at any time upon request, without further or additional consideration but at the expense of said assignee, execute such additional assignments and other writings and do such additional acts as said assignee may deem necessary or desirable to perfect the assignee's enjoyment of this grant, and render all necessary assistance in making application for and obtaining original, divisional, continuations, continuations-in-part, reexamined, reissued, or extended Letters Patent of the United States or of any and all foreign countries on said invention, and in enforcing any rights or choices in action accruing as a result of such applications or patents, by giving testimony in any proceedings or transactions involving such applications or patents, and by executing preliminary statements and other affidavits, it being understood that the foregoing covenant and agreement shall bind, and inure to the benefit of the assigns and legal representatives of assignor and assignee;

AND I request the Commissioner for Patents and Trademarks to issue any Letters Patent of the United States which may be issued for said invention to said Cardinal Health 303, Inc., its legal representatives, successors or assigns, as the sole owner of the entire right, title and interest in and to said patent and the invention covered thereby.

07-10-09

Date

Robert A. Sobie
Robert Andrew SOBIE

Signature Witness:

Shirley Byers

STATE OF _____

) SS:

COUNTY OF _____

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared Robert Andrew SOBIE, proved to me through satisfactory evidence of identification, which consisted of _____, to be the person whose name is signed on the preceding or attached document in my presence.

Notary Public

My commission expires _____

*See attached
acknowledgment*

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of San Diego

On 07-10-09 before me, Sherida Heather Egan, Notary Public

personally appeared Robert Sobie



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.

Signature [Signature] Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Assignment

Document Date: 07-10-09 Number of Pages: _____

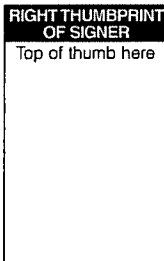
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: Robert Sobie

- ☒ Individual
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____



Signer's Name: _____

- ☐ Individual
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

