

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT3529024

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment to correct the ASSIGNEE NAME previously recorded on Reel 019804 Frame 0398. Assignor(s) hereby confirms the ASSIGNMENT.
RESUBMIT DOCUMENT ID:	503380165
CONVEYING PARTY DATA	
Name	Execution Date
RODOLFO C. QUIJANA	06/22/2007
ANDREW H. CRAGG	06/22/2007
HOSHENG TU	06/15/2007
STEPHEN A. SOSNOWSKI	06/15/2007
GEORGE WALLACE	06/15/2007
RECEIVING PARTY DATA	
Name:	RESHAPE MEDICAL, INC.
Street Address:	100 CALLE IGLESIA
City:	SAN CLEMENTE
State/Country:	CALIFORNIA
Postal Code:	92672
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	11694536
CORRESPONDENCE DATA	
Fax Number:	(206)359-7198
<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:	2063598000
Email:	patentprocurement@perkinscoie.com
Correspondent Name:	PERKINS COIE LLP - SEA GENERAL
Address Line 1:	PATENT PROCUREMENT
Address Line 2:	P.O. BOX 1247
Address Line 4:	SEATTLE, WASHINGTON 98111-1247
ATTORNEY DOCKET NUMBER:	076140-8018.US00
NAME OF SUBMITTER:	KRISTINE SPRINGER
SIGNATURE:	/Kristine Springer/

DATE SIGNED:	09/16/2015
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Total Attachments: 6

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RECORDATION FORM COVER SHEET
PATENTS ONLY

To the Director of the U.S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

1. Name of conveying party(ies)

Rodolfo C. Quijana,
Andrew H. Cragg,
Hosheng Tu,
Stephen A. Sosnowski,
George Wallace

2. Name and address of receiving party(ies)

Name: ReShape Medical Corporation

Internal Address: Suite 140

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

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

June 22, 2007, June 22, 2007,
June 15, 2007, June 15, 2007,

Execution Date(s) June 15, 2007 in the order listed

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

Street Address: 26429 Rancho Parkway

City: Lake Forest

State: California

Country: USA Zip: 92630

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

4. Application or patent number(s):

This document is being filed together with a new application.

A. Patent Application No.(s)
11/694,536

B. Patent No.(s)

Additional numbers attached? Yes No

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

Name: Peter J. Gluck

Internal Address: _____

Street Address: 2450 Colorado Avenue

Suite 400E

City: Santa Monica

State: California Zip: 90404

Phone Number: (949) 732-6507

Fax Number: (310) 686-7800

Email Address: LAIPMAIL@qiglaw.com

6. Total number of applications and patents involved: 1

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

- Authorized to be charged by credit card
- Authorized to be charged to deposit account
- Enclosed
- None required (government interest not affecting title)

8. Payment Information

a. Credit Card Last 4 Numbers _____

Expiration Date _____

b. Deposit Account Number 502638

Authorized User Name Peter J. Gluck

9. Signature: _____

Signature

September 10, 2007

Date

Peter J. Gluck

Name of Person Signing

Total number of pages including cover sheet, attachments, and document: 6

ASSIGNMENT

WHEREAS, I, Rodolfo C. Quijana, residing at 27451 Lost Trail, Laguna Hills, California 92653, Andrew H. Cragg, residing at 5024 Bruce Place, Edina, Minnesota 55424, Hosheng Tu, residing at 15 Riez, Newport Beach, CA 92657, Stephen A. Sosnowski, residing at 2958 Ora Avo Terrace, Vista, California 92084, and George Wallace, residing at 10 Brentano Dr., Coto de Caza, California 92679, the undersigned inventors and ASSIGNOR herein, have invented a **INTRAGASTRIC BALLOON SYSTEM AND THERAPEUTIC PROCESSES AND PRODUCTS**, for which we have filed an application for a Utility Patent of the United States on March 30, 2007 as application no. 11/694,536 and have the ability to claim the priority benefit of the same in an application for U.S. Letters Patent, or and International filings, and of which inventions and improvements we are the joint owners; and

ReShape Medical, Inc.

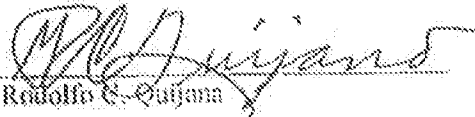
WHEREAS, ~~ReShape Medical~~ a corporation organized and existing under the laws of the State of Delaware, having its statewide administrative offices located at 26429 Rancho Parkway, Suite 140, Lake Forest, CA 92630, the ASSIGNEE herein, desires to acquire the entire right, title and interest in and to said inventions, applications and Letters Patent to be granted and issued thereon;

NOW, THEREFORE, for and in consideration of the sum of One Dollar (\$1.00) paid by the ASSIGNEE to us, and other valuable consideration, the receipt and legal sufficiency of all of which is hereby acknowledged, we, the said ASSIGNORS, have sold and do hereby sell, assign, transfer and set over unto said ASSIGNEE, its successors and assigns, the entire right, title and interest in and to said inventions and all improvements thereon, in and to said application for Letters Patent thereon, in and to applications pertaining to or based upon said inventions and applications, including divisional and continuing applications and continuations-in-part, and in and to any and all Letters Patent which may be granted and issued on said inventions and applications, or any of them, not only for, to and in the United States of America, its territories and possessions, but for, to and in all countries foreign thereto, together with and including all priority rights based upon any and all applications in the United States of America covered by this Assignment.

And for the above-named considerations, we do hereby agree that we will, at the request of said ASSIGNEE, execute any and all applications for Letters Patent for said inventions and any and all other papers and documents and do all other and further lawful acts that said ASSIGNEE may deem necessary or desirable to obtain Letters Patent on said inventions, to secure the grant of such Letters Patent and to perfect and vest in the ASSIGNEE the entire right, title and interest in the inventions, applications and Letters Patent.

And for the above-named considerations, we do hereby authorize and empower the ASSIGNEE, its successors and assigns, to apply for and obtain, in its or their own names, Letters Patent for the said inventions before competent International Authorities and in any and all countries foreign to the United States in which applications for Letters Patent can be so made or Letters Patent so obtained.

Dated: 4/22/07

By 
Rodolfo C. Quijano

County of _____) ss.

On the day of _____, 2007 before me, _____, Notary Public personally appeared _____, personally known to me/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/het/their authorized capacity(ies), and that he/het/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument

WITNESS my hand and official seal.

SF.M.

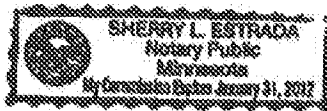
Signature of Notary Public

Dated: 6/22/07

By [Signature]
Andrew H. Cragg

County of Dakota ss.

On this day of June 22nd, 2007 before me, Sherry Estrada Notary Public personally appeared Andrew H. Cragg, personally known to me/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.



SEAL

WITNESS my hand and official seal.

[Signature]
Signature of Notary Public

Dated: _____

By _____
Hosheng Tu

County of _____ ss.

On this day of _____, 2007 before me, _____, Notary Public personally appeared _____, personally known to me/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.

WITNESS my hand and official seal.

SEAL

Signature of Notary Public

Dated: _____

By _____
Andrew H. Cragg

County of _____) ss.

On this day of _____, 2007 before me, _____, Notary Public personally appeared _____, personally known to me/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.

WITNESS my hand and official seal.

SEAL

Signature of Notary Public

Dated: June 15, 2007

By Hosheng Tu
Hosheng Tu

County of _____) ss.

On this day of _____, 2007 before me, _____, Notary Public personally appeared _____, personally known to me/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.

WITNESS my hand and official seal.

SEAL

Signature of Notary Public

Dated: 6/15/07

By: Stephen A. Sosnowski
Stephen A. Sosnowski

County of _____) ss.

On this day of _____, 2007 before me, _____, Notary Public personally appeared _____, personally known to me/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.

WITNESS my hand and official seal.

SEAL

Signature of Notary Public

Dated: 6/15/07

By: George Wallace
George Wallace

County of _____) ss.

On this day of _____, 2007 before me, _____, Notary Public personally appeared _____, personally known to me/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.

WITNESS my hand and official seal.

SEAL

Signature of Notary Public