PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT3630996

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
STEPHEN JOSEPH CARACCI	11/23/2015
YE FANG	11/23/2015
ANN MEEJIN FERRIE	11/20/2015
YAN JIN	11/19/2015
LINGYAN WANG	11/23/2015
YUE ZHOU	11/23/2015

RECEIVING PARTY DATA

Name:	CORNING INCORPORATED
Street Address:	SP-TI-03
City:	CORNING
State/Country:	NEW YORK
Postal Code:	14831

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	14950771

CORRESPONDENCE DATA

Fax Number:

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.

Phone: 607-974-0084
Email: lbuelll@corning.com

Correspondent Name: CORNING INCORPORATED

Address Line 1: SP-TI-3-1

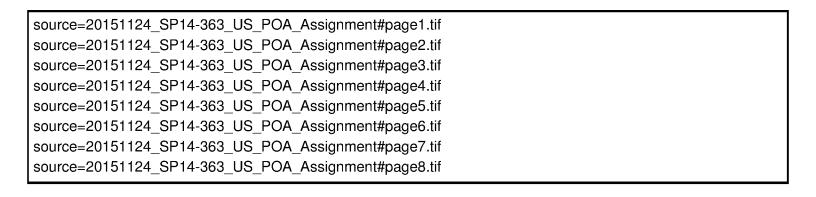
Address Line 4: CORNING, NEW YORK 14831

ATTORNEY DOCKET NUMBER:	SP14-363
NAME OF SUBMITTER:	SUSAN S. WILKS
SIGNATURE:	/Susan S. Wilks/
DATE SIGNED:	11/24/2015

Total Attachments: 8

PATENT REEL: 037134 FRAME: 0295

503584367



PATENT REEL: 037134 FRAME: 0296

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor:

Stephen Joseph Caracci

Applicant:

CORNING INCORPORATED

COMBINED STATEMENT UNDER 37 C.F.R. § 3.73(c) and

POWER OF ATTORNEY

Serial No.:

Filed:

For:

MAGNETIC MICROCARRIERS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

STATEMENT UNDER 37 C.F.R. § 3.73(c)

CORNING INCORPORATED, a New York corporation, certifies that it is the assignee of the entire right, title and interest in the patent application identified above, as evidenced by an assignment from the inventor(s) thereof that was recorded in the United States Patent and Trademark Office at Reel _______ Frame ______, or a true copy of which is attached hereto. As required by 37 CFR 3.73(c)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or currently is being, submitted for recordation pursuant to 37 CFR 3.11.

The undersigned has reviewed the above referenced assignment of the patent application identified above and, to the best of the undersigned's knowledge and belief, title is in the assignee identified above.

The undersigned is empowered to sign this statement on behalf of the assignee.

POWER OF ATTORNEY BY ASSIGNEE

CORNING INCORPORATED, the assignee of the full and exclusive right, title and interest in and to the accompanying application for United States Letters Patent entitled MAGNETIC MICROCARRIERS and executed by Stephen Joseph Caracci, Ye Fang, Ann MeeJin Ferrie, Yan Jin, Lingyan Wang and Yue Zhou on 11/23/15, 11/23/15, 11/20/15, 11/19/15, 11/23/15, 11/23/15, respectively, appoints the practitioners associated with the Customer Number provided below (i.e., the practitioners associated with the Intellectual Property Department, Corning Incorporated) to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith. Please direct all correspondence to Susan S. Wilks at the address associated with that Customer Number.

Customer Number: 22928

CORNING INCORPORATED

Date: 11/24 15

By

Thomas R. Beall Vice President and Chief IP Counsel Corning Incorporated

U R BILL

ASSIGNMENT

FOR VALUE RECEIVED, I, as a below named inventor, hereby sell, assign and transfer unto Corning Incorporated, a corporation organized and existing under the laws of the State of New York, having its principal place of business at Corning, New York, (hereinafter CORNING), as assignee, and unto its successors, assigns and legal representatives, the entire right, title and interest, for all countries, in and to certain inventions relating to a MAGNETIC MICROCARRIERS, such inventions being generally described in an application for Letters Patent of the United States executed on

DATE	11/23/2015
DATE	11/23/2015
DATE	11/20/2015
DATE	11/19/2015
DATE	11/28/15
DATE	4/23/16
	* *

and in any future patent applications claiming the benefit of the filing date of that application, and all the rights and privileges under any and all Letters Patents that may be granted therefore.

I request that any and all patents for said inventions be issued to CORNING, its successors, assigns and legal representatives, or to such nominees as CORNING may designate.

I agree that, when requested, I will, without charge to CORNING and at CORNING's expense, sign all papers, take all rightful oaths, and do all acts which may be necessary, desirable or convenient for securing and maintaining patents for said inventions in any and all countries and for vesting title thereto in CORNING, its successors, assigns and legal representatives or nominees.

I authorize and empower CORNING, its successors, assigns and legal representatives or nominees, to invoke and claim for any application for patent or other form of protection for said inventions filed by it or them, the benefit of the right of priority provided by the International Convention for the Protection of Industrial Property, as amended, or by any convention which may henceforth be substituted for said Convention or entered as a supplement to, and to invoke and claim such right of priority without further written or oral authorization.

I hereby consent that a copy of this assignment shall be deemed a full legal and formal equivalent of any assignment, consent to file or like document which may be required in any country for any purpose and more particularly in proof of the right of CORNING, or its successors, assigns and legal representatives or nominees to claim the aforesaid benefit of the right of priority provided by the International Convention for the Protection of Industrial Property, as amended, or by any convention which may henceforth be substituted for it or entered as a supplement to it.

Revised: January 24, 2013

I covenant with CORNING, its successors, assigns and legal representatives or nominees, that the rights and property herein conveyed are free and clear of any encumbrance, and that I have full right to convey the same as herein expressed.

Date	Stephen Joseph Caracci
Date	Ye Fang
Date	Ann MeeJin Ferrie
11/19/2015 Date	Yan Jin
Date	Lingyan Wang
Date	Yue Zhou
eate of New York) : ss. ounty of Steuben)	
n the day ofescribed in and who executed	2015, before me personally came Stephen Joseph Caracci known to be the person the foregoing instrument, and acknowledged that they executed the same.
	Notary Public
tate of New York) : ss. ounty of Steuben)	
n the day of ho executed the foregoing ins	2015, before me personally came Ye Fang known to be the person described in and strument; and acknowledged that they executed the same.
	Notary Public

Revised: June 4, 2015

Signed at Corning, NY, this

State of New York)	
County of Steuben) 58.	
On the day of described in and who exec	2015, before me personally came Ann MerJin Ferrie known to be the person cuted the foregoing instrument, and acknowledged that they executed the same.
	Notary Public
State of) : ss. County of)	Treate Cae attributed assumm ledgement
On the day of who executed the foregon	2015, before me personally came Van Jin known to be the person described in and ag instrument, and acknowledged that they executed the same.
and the second second	Notary Public
Standard Control of the Control of t	
State of New York)	
County of Steuben) On the day of	2015, before me personally came Lingyan Wang known to be the person described
an win who exermed me t	oregoing instrument, and acknowledged that they executed the same. Notary Public
State of New York) SS. County of Steuben)	
On theday of who executed the foregoin	2015, before me personally came Yue Zhou known to be the person described in and ag instrument, and acknowledged that they executed the same.
	Notary Public

Revised: June 4, 2015

of the State of California that the foregoing paragis true and correct. ### WITNESS my hand and official seal. Commission & 1883070	lifornia all-purpose acrnowled	GMENT CIVIL CODE § 1189
State of California County of GANTA CAREA On On Other Date Date Description of Attached Document State of California County of GANTA CAREA On On Other Date Description of Attached Document Though this section is optional, completing this information can deter alteration of the document. Description of Attached Document Title or Type of Document MARANTIC Allow Carea Pages: 2. Signer(s) Capacity(ies) Chairmed by Signer(s) OPTIONAL Though this section is optional, completing this information can deter alteration of the document. Description of Attached Document Title or Type of Document: MARANTIC Allow Carea Description of Attached Document Title or Type of Document: MARANTIC Allow Carea Signer's Name: Corporate Officer — Title(s): Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Capacity(ies) Claimed Description Attorney in Fact Corporate Officer — Title(s): Capacity(ies) Claimed Description Attorney in Fact Corporate Officer — Title(s): Capacity(ies) Claimed Description Conservator Chies: Capacity(ies) Claimed Description Corporate Officer — Title(s): Capacity(ies) Claimed Description Corporate Officer — Title(s): Capacity(ies) Claimed Description Capacity(ies) Claimed Description Capacity(ies) Claimed Description Capacity(ies) Claimed Description Capacity(ies) Claimed D		
Name(s) of Signer(s) Who proved to me on the basis of satisfactory evidence to be the person(s)-whose name(s) is subscribed to the within instrument and acknowledged to me that he/she/they executed the samilish/her/fiber authorized capacity(ies), and that by his/her/fiber signature(s) on the instrument the person or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERIURY under the of the State of California that the foregoing parage is true and cornect. WITNESS my hand and official seal. WITNESS my hand and official seal. Sama Clais Guardin Sama Sama Clais Guardin Sama Sama Clais Guardin Sama Clais Guardin Fraudulent reattachment of this form to an unintended document. Description of Attached Document fraudulent reattachment of this form to an unintended document. Description of Attached Document Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer(s) Other Than Named Above: Signer's Name: Corporate Officer — Title(s): Partner — Limited — General Individual — Attorney in Fact I rustee — Guardian or Conservator Other:	notary public or other officer completing this certificate is attached, and not	icate verifies only the identity of the individual who signed the the truthfulness, accuracy, or validity of that document.
Name(s) of Signer(s) Who proved to me on the basis of satisfactory evidence to be the person(s)-whose name(s) is subscribed to the within instrument and acknowledged to me that he/she/they executed the samilish/her/fiber authorized capacity(ies), and that by his/her/fiber signature(s) on the instrument the person or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERIURY under the of the State of California that the foregoing parage is true and cornect. WITNESS my hand and official seal. WITNESS my hand and official seal. Sama Clais Guardin Sama Sama Clais Guardin Sama Sama Clais Guardin Sama Clais Guardin Fraudulent reattachment of this form to an unintended document. Description of Attached Document fraudulent reattachment of this form to an unintended document. Description of Attached Document Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer(s) Other Than Named Above: Signer's Name: Corporate Officer — Title(s): Partner — Limited — General Individual — Attorney in Fact I rustee — Guardian or Conservator Other:	te of California	}
Name(s) of Signer(s) who proved to me on the basis of satisfactory evidence to be the person(s)-whose name(s) is subscribed to the within instrument and acknowledged to me that he/she/they executed the same bubscribed to the within instrument and acknowledged to me that he/she/they executed the same bubscribed to the within instrument and acknowledged to me that he/she/they executed the same bubscribed to the within instrument and acknowledged to me that he/she/they executed the same bubscribed to the instrument. I certify under PENALTY OF PERIURY under the of the State of California that the foregoing parage is true and cornect. WITNESS my hand and official seal. WITNESS my hand and official seal. Signature of Notary Public Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Alternation of the document of this form to an unintended document. Signer(s) Other Than Named Above: Document Date: Description of Pages: Signer(s) Other Than Named Above: Signer's Name: Corporate Officer — Title(s): Partner — Climited — General — Partner — Climited — General — Individual — Attorney in Fact — Individual — Attorney in Fact — Other:	Miles Conse	TENNALOGIA PARIA NOTAZY PUNALC
Place Notary Seal Above Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document. Description of Attached Document fraudulent reattachment of this form to an unintended document. Description of Attached Document: Alter Type of Document:		Here Insert Name and Title of the Officer
Anne(s) of Signer(s) who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is ubscribed to the within instrument and acknowledged to me that he/she/hey executed the same/ne/thefrauthorized capacity(s), and that by his/her/their signature(s) on the instrument the person of the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the of the State of California that the foregoing paragist under the of the State of California that the foregoing paragist under the of the State of California that the foregoing paragist under the of the State of California that the foregoing paragist under the of the State of California that the foregoing paragist under the same states states. WITNESS my hand and official seal. WITNESS my hand and official seal. Signature of Notary Public Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document. Description of Attached Document Itle or Type of Document: Machieria Michieria Document Date: WITNESS my hand and official seal. Signature of Notary Public Signature of Notary Public Document Date: Itle or Type of Document: Michieria Michieria Document Date: Itle or Type of Document: Signer(s) Other Than Named Above: Document Date: Itle or Type of Document: Signer(s) Other Than Named Above: Document Date: Itle or Type of Document: Itle	sonally appeared	YAN TIN
ubscribed to the within instrument and acknowledged to me that the/she/they executed the same is/her/their authorized capacity(ies); and that by his/her/their signature(s) on the instrument the persor is hereful upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the of the State of California that the foregoing paragis true and correct. WITNESS my hand and official seal. WITNESS my hand and official seal. Semistries are 23, 2018 Place Notary Seal Above Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document. Description of Attached Document iller or Type of Document: Add Not Care Care Care Comment Date: Liter or Type of Document: Machinet C. Micro Care Care Comment Date: Capacity(ies) Claimed by Signer(s) Capacity(ies) Claimed by Signer(s) Corporate Officer — Title(s): Corporate Officer — Title(s): Corporate Officer — Dilmited General Individual Attomey, in Fact Corporate Guardian or Conservator Corporate Officer — Guardian or Conservator Corporate Officer — Guardian or Conservator Corporate Officer — Conservator Corporate		
of the State of California that the foregoing paragis true and correct. ***WINES** my hand and official seal.** **Commission** 1983070 **Notary Public - California Santa Clarid County** **Notary Public - California Santa Clarid County** **Notary Seal Above** **Place Notary Seal Above** **Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document.** **Description of Attached Document** **Itle or Type of Document** **Macrica Microcarder** © Document Date: 11/13/2015** **Itle or Type of Document** **Macrica Microcarder** © Document Date: 11/13/2015** **Itle or Type of Document** **Macrica Microcarder** © Document Date: 11/13/2015** **Itle or Type of Document** **Itle or Type of Document** **Macrica Microcarder** © Document Date: 11/13/2015** **Itle or Type of Document** **Itle or Type of Document** **Macrica Microcarder** © Document Date: 11/13/2015** **Itle or Type of Document** **Itle or Type of Document** **Macrica Microcarder** © Document Date: 11/13/2015** **Itle or Type of Document** **Itle or Type of Document** **Macrica Microcarder** © Document Date: 11/13/2015** **Itle or Type of Document** **Itle or Type of Document** **Macrica Microcarder** © Document Date: 11/13/2015** **Itle or Type of Document** **Itle or Type of Document*	scribed to the within instrument and acknother/thefrauthorized capacity(ies); and that by	rwledged to me that he/she/they executed the same in his/her/their signature(s) on the instrument the person(s).
SENNIFER CHIN Commission # 1888070 Notary Public		I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document. Description of Attached Document: Itle or Type of Document: MACNETIC MICHOCARNICES Document Date: Jumber of Pages: Signer(s) Other Than Named Above: Dapacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — □ Limited □ General Individual □ Attorney in Fact Trustee □ Guardian or Conservator Other: Other:	JENNIFER CHIN Commission # 1983070	
Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document. Description of Attached Document: Itle or Type of Document: MACNETIC MICHOCARNICES Document Date: Jumber of Pages: Signer(s) Other Than Named Above: Dapacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — □ Limited □ General Individual □ Attorney in Fact Trustee □ Guardian or Conservator Other: Other:	Santa Clara County	Signature 700
Place Notary Seal Above OPTIONAL Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document. Description of Attached Document: Itle or Type of Document: MACNETIC MICHOCARNICES Document Date: Jumber of Pages: Signer(s) Other Than Named Above: Dapacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — □ Limited □ General Individual □ Attorney in Fact Trustee □ Guardian or Conservator Other: Other:	othedestudindischethichethilluludindischethilluluding	Signature of Notary Public
Though this section is optional, completing this information can deter alteration of the document of transport of the fraudulent reattachment of this form to an unintended document. Description of Attached Document Description of Attached Doc		
Though this section is optional, completing this information can deter alteration of the document of transport of the fraudulent reattachment of this form to an unintended document. Description of Attached Document Description of Attached Doc		
Though this section is optional, completing this information can deter alteration of the document fraudulent reattachment of this form to an unintended document. Description of Attached Document Description o	Place Notary Seal Above	
Itle or Type of Document: MACNETIC MICKER CASHERS Document Date: 1/17/2015** Jumber of Pages: 20 Signer(s) Other Than Named Above:	Though this section is optional, completing th	nis information can deter alteration of the document or
Capacity(ies) Claimed by Signer(s) Signer's Name: Signer's Name: Corporate Officer — Title(s): Corporate Officer — Title(s): Partner — Limited General Partner — Limited General Individual Attorney in Fact Individual Attorney in Fact Trustee Guardian or Conservator Trustee Guardian or Conservato	e or Type of Document: MAGNETIC MIC	##CAMMERS Document Date: 11/19/3415
igner's Name: Signer's Name: Signer		han Named Aboye;
Corporate Officer — Title(s): ☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attomey in Fact ☐ Individual ☐ Attomey in Fact ☐ Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservator ☐ Other: ☐ Other:		Signer's Name:
Hndividual □ Attomey in Fact □ Individual □ Attomey in Fact Trustee □ Guardian or Conservator □ Trustee □ Guardian or Conservato Other: □ Other:	Corporate Officer — Title(s):	☐ Corporate Officer — Title(s):
l Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservator ☐ Other:		
Other:		☐ Individual ☐ Attomey in Fact
		and at a contract to the contr
igner is Representing: Signer is Representing:	ner is Representing:	

@2014 National Notary Association - www.NationalNotary.org - 1-800-US NOTARY (1-800-876-6827) | Item #5907

PATENT REEL: 037134 FRAME: 0302

I covenant with CORNING, its successors, assigns and legal representatives or nominces, that the rights and property herein conveyed are free and clear of any encumbrance, and that I have full right to convey the same as herein expressed.

Signed at Coming, NY, this	10/1/	ggrande	
1/1/2/2015		anve."	
Date	Stephenilosoph Caracci		
22/29/12013	philiparanton in the		
Date	Ye Fang		
11/20/15	- (In May -	de contraction de la contracti	
Date	Ann MeeJin Farrie		
	•		
Date	Yan Jin		
11/23/2015	Jana production	egent.	
Date	Lingyan Wang		
11/23/2015			
Date	Yue Zhou		
State of New York)			
(SS, County of Steuben)			
On the <u>23 day of MovCoulce</u> described in and who executed the f	oxegoing instrument, and acknowl	hana Soullian	person
	Neu	ary Public	
w ⁱ			
State of New York) ; ss. County of Steuben)	Notas	a L. Wilson ry Public, State of New York fied in Steuben County No. 01W16314977 ommission Expires November 17, 2225	- -
On the $\frac{23}{\text{day of } 000000}$	2015, before me personally cam	e Ye Fang known to be the person described i	in and
who executed the foregoing instrum	لله	xeculed the same: Ana LULAN ary Public	
	Shans	L. Wilson	
	UUSIM	/ Public, State of New York led in Stauben County No. 011/916314977 minission Expires November 17, 22216	ere en

Revised: June 4, 2015

State of New York) : ss. County of Steuben) On the 20 day of 10 very 10 2015, before me persor described in and who executed the foregoing instrument, and act	nally came Ann MeeJin Ferrie known to be the person knowledged that they executed the same. Notary Public
State of) : ss. County of) On the day of 2015, before me personal	Shana L. Wilson Notary Public, State of New York Qualified in Steuben County No. 01W16314977 My Commission Expires November 17, 2018 ly came Yan Jin known to be the person described in and
who executed the foregoing instrument, and acknowledged that	Notary Public
State of New York) : ss. County of Steuben) On the Z3 day of New 2015, before me personall in and who executed the foregoing instrument, and acknowledge	y came Lingyan Wang known to be the person described that they executed the same. Notary Public
State of New York)	Shana L. Wilson Notary Public, State of New York Qualified in Steuben County No. 01WI6314977 My Commission Expires November 17, 2018
County of Steuben) On the 23 day of 10 vente 2015, before me personally who executed the foregoing instrument, and acknowledged that	Shona L. Welden
	Notary Public

Shana L. Wilson Notary Public, State of New York Qualified in Steuben County No. 01WI6314977 My Commission Expires November 17,2018

Revised: June 4, 2015

PATENT REEL: 037134 FRAME: 0304

RECORDED: 11/24/2015