

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT3795652

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
FERGAL KERINS	10/16/2014
JOSHUA LEE RICHMOND	10/16/2014
SHERYL RAE THINGVOLD	10/16/2014
RECEIVING PARTY DATA	
Name:	SYNAPTIVE MEDICAL (BARBADOS) INC.
Street Address:	CHANCERY HOUSE
Internal Address:	HIGH STREET
City:	BRIDGETOWN
State/Country:	BARBADOS
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14917233
CORRESPONDENCE DATA	
Fax Number:	(703)739-9889
<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:	703-739-9888
Email:	DOWELL@DOWELLPC.COM
Correspondent Name:	DOWELL & DOWELL, P.C.
Address Line 1:	103 ORONOCO ST, SUITE 220
Address Line 4:	ALEXANDRIA, VIRGINIA 22314
ATTORNEY DOCKET NUMBER:	19563
NAME OF SUBMITTER:	RALPH A. DOWELL
SIGNATURE:	/Ralph A. Dowell/
DATE SIGNED:	03/22/2016
Total Attachments: 5	
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WORLDWIDE ASSIGNMENT

We, **Fergal Kerins** (full postal address: 100 Oriole Parkway, Suite 103, Toronto, Ontario, M5P 2G8 CANADA), **Joshua Lee Richmond** (full postal address: 133 York Downs Drive, Toronto, Ontario, M3H 2G6 CANADA), and **Sheryl Rae Thingvold** (full postal address: 167 Humercrest Blvd, Toronto, Ontario, M6S 4L5 CANADA) have invented, **PHANTOM PRODUCTION TOOL**, for which the international patent application was filed:

Filing Date: October 09, 2014
Serial No. CA2014050975

and in consideration of Two Dollars (\$2.00) to each of us, paid in hand, the receipt and sufficiency of which is hereby acknowledged, and other good and valuable consideration, WE by these presents confirm that WE have sold, transferred and assigned and do hereby sell, transfer and assign to **SYNAPTIVE MEDICAL (BARBADOS) INC.**, ("Assignee"), having offices at, Chancery House, High Street, Bridgetown, Barbados, its successors and assigns or nominees, all OUR rights, title and interest in all the countries of the world in and to OUR invention as fully described in the United States patent application, and WE sell, transfer and assign to **SYNAPTIVE MEDICAL (BARBADOS) INC.** all OUR rights to apply for patent on said invention and all OUR priority rights that derive from any such applications in all the countries of the world including any and all full utility applications, divisions, continuations, continuation-in-part, re-examinations, renewals, reissues and/or extensions thereof, any design applications originating therefrom, International PCT patent applications and all national phase applications and all OUR corresponding rights, title and interest in and to any patent which may issue therefor in all the countries of the world, to have and to hold for **SYNAPTIVE MEDICAL (BARBADOS) INC.**'s own use and **SYNAPTIVE MEDICAL (BARBADOS) INC.**'s successors and assigns as fully and entirely as the same might be held by us if this sale had not been made, and we each make this assignment independently of each other.

AND WE HEREBY authorize Assignee, its successors, assigns, or nominees, to invoke and claim for any applications for patent or other form or protection filed, 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 it, and to invoke and claim such right of priority without need for further written or oral authorization;

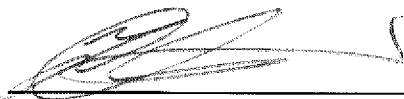
AND WE authorize HILL & SCHUMACHER, Patent and Trademark Agents, of 264 Avenue Road, Toronto, Ontario M4V 2G7, Canada to enter the particulars of the signature and particulars of the Declaration when missing.

AND WE IRREVOCABLY CONSENT and agree that any and all applications for patent or other form of protection may be applied for in OUR names, the personal names of the inventors, without further consideration;

AND WE UNDERTAKE to sign such further documents to effect the aforesaid sale, assignment and transfer as may be required from time to time, without further consideration, but at the expense of **SYNAPTIVE MEDICAL (BARBADOS) INC.**

This assignment can be signed in counterparts.

SIGNED at Toronto, Ontario, CANADA, this 16th day of October, 2014.



Fergal Kerins

DECLARATION OF WITNESS

I, **Maia Jones**, full post office address being 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see **Fergal Kerins** who is personally known to me to be the person named in the above assignment duly sign and execute the same.

DECLARED at Toronto, Ontario, CANADA, this 16 day of October, 2014.



Maia Jones

SIGNED at Toronto, Ontario, CANADA, this 16 day of October, 2014.



Joshua Lee Richmond

DECLARATION OF WITNESS

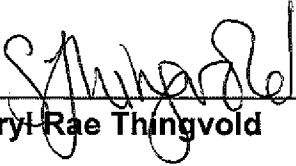
I, **Maia Jones**, full post office address being 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see **Joshua Lee Richmond** who is personally known to me to be the person named in the above assignment duly sign and execute the same.

DECLARED at Toronto, Ontario, CANADA, this 16 day of October, 2014.



Maia Jones

SIGNED at Toronto, Ontario, CANADA, this 16 day of October, 2014.




Sheryl Rae Thingvold

DECLARATION OF WITNESS

I, **Maia Jones**, full post office address being 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see **Sheryl Rae Thingvold** who is personally known to me to be the person named in the above assignment duly sign and execute the same.

DECLARED at Toronto, Ontario, CANADA, this 16 day of October, 2014.



Maia Jones

ACCEPTANCE

The Assignee accepts this assignment.

Signed at Toronto, Ontario, CANADA, this 28 day of October, 2014.

SYNAPTIVE MEDICAL (BARBADOS) INC.

Signature: 

Name: Cameron Piron

Title: Director and President, Synaptive Medical (Barbados) Inc.

DECLARATION OF WITNESS

I, Maia Jones, whose full post office address is 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see **Cameron Piron** who is personally known to me to be the person named above duly sign and execute the above on behalf of **SYNAPTIVE MEDICAL (BARBADOS) INC.**

DECLARED at Toronto, Ontario, CANADA, this 28 day of October, 2014.


Maia Jones