#### 503860166 06/07/2016

#### PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT3906815

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

#### **CONVEYING PARTY DATA**

Name	Execution Date
FERGAL KERINS	10/27/2015
CAMERON ANTHONY PIRON	10/27/2015
GREGORY ALLAN WHITTON	10/27/2015
TIMOTHEUS ANTON GMEINER	10/27/2015
JEFF ALAN STAINSBY	10/26/2015
CHAD TYLER HARRIS	10/26/2015
SHERYL RAE THINGVOLD	10/27/2015

#### **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:	15102448

#### **CORRESPONDENCE DATA**

**Fax Number:** (703)739-9889

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:** 703-739-9888

Email:DOWELL@DOWELLPC.COMCorrespondent Name:DOWELL & DOWELL, P.C.Address Line 1:103 ORONOCO ST, SUITE 220Address Line 4:ALEXANDRIA, VIRGINIA 22314

ATTORNEY DOCKET NUMBER:	19645NP
NAME OF SUBMITTER:	RALPH A. DOWELL
SIGNATURE:	/Ralph A. Dowell/
DATE SIGNED:	06/07/2016

# Total Attachments: 8 source=19645Assignment#page1.tif source=19645Assignment#page3.tif source=19645Assignment#page4.tif source=19645Assignment#page5.tif source=19645Assignment#page6.tif source=19645Assignment#page7.tif source=19645Assignment#page8.tif

# **WORLDWIDE ASSIGNMENT**

WE, Fergal KERINS (full postal address: 100 Oriole Parkway, Suite 103, Toronto, Ontario, M5P 2G8 CANADA), Timotheus Anton GMEINER (full postal address: 13 Euclid Ave. Toronto, Ontario M6J2J5 CANADA), Jeff Alan STAINSBY (full postal address: 115 Sheldrake Blvd, Toronto, Ontario, M4P 2B1 CANADA), Chad Tyler HARRIS (full postal address: 2001-80 John Street, Toronto, Ontario, M5V 3X4 CANADA), Sheryl Rae THINGVOLD (full postal address: 167 Humercrest Blvd, Toronto, Ontario, M6S 4L5 CANADA), and Gregory Allan WHITTON (full postal address: 914-255 Glenlake Avenue, Toronto, Ontario, M6P 1G2 CANADA) have invented, CEREBROSPINAL DIFFUSION PHANTOM, for which the international application was filed:

Filing Date: 9/4/2015 Serial No. CA2015050849

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 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, 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 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 とナ day	of October, 2015.
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Forgal KEDING			

#### **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 27 day of October, 2015.

Maia Jones

#### **ACCEPTANCE**

The Assignee accepts this assignment.

Signed at Toronto, Ontario, CANADA, this 27 day of October, 2015.

# SYNAPTIVE MEDICAL (BARBADOS) INC.

Signature:

Name:

Cameron Anthony 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 Anthony 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 27 day of October, 2015.

Maia Jones

SIGNED at Toronto, Ontario, CANAD	OA, this 27 day of October, 2015.
L gill	•
Gregory Allan WHITTON	,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>

#### **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 **Gregory Allan WHITTON** 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 27 day of October, 2015.

Maia Jones

SIGNED at Toronto, Ontario, CANADA, this 27 day of October, 2015.

Timotheus Anton GMEINER

## **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 **Timotheus Anton GMEINER** 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 27 day of October, 2015.

Maia Jones

SIGNED at Toronto, Ontario, CANADA, this 26 day of October, 2015.
Jeff Henry
Jeff Alan STAINSBY

#### **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 **Jeff Alan STAINSBY** 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 24 day of October, 2015.

Maia Jones

SIGNED at Toronto, Ontario, CANADA, this 26 day of October, 2015.

Chad Tyler HARRIS

#### **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 Chad Tyler HARRIS 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 26 day of October, 2015.

Maia Jones

SIGNED at Toronto, Ontario, CANADA, this _	27 day of October 2015
Sheryi Rae THINGVOLD	
Shery 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 27 day of October, 2015.

Maia Jones