

<b>PATENT ASSIGNMENT COVER SHEET</b>
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Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT4178147

<b>SUBMISSION TYPE:</b>	CORRECTIVE ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	Corrective Assignment to correct the INCORRECT ATTORNEY DOCKET NO. 3493-0575PUS1 ON THE ASSIGNMENT DOCUMENT previously recorded on Reel 040360 Frame 0772. Assignor(s) hereby confirms the CORRECT ATTORNEY DOCKET NO. ON THE ASSIGNMENT IS 3493-0579PUS1.

**CONVEYING PARTY DATA**

Name	Execution Date
GUY CHABOT	09/20/2016
SYLVIANE GIORGI-RENAULT	07/28/2016
STÉPHANIE DESBENE-FINCK	07/28/2016
PHILIPPE HELISSEY	07/28/2016
RAPHAËL LABRUERE	07/28/2016
MARLÈNE TESTUD	08/02/2016
DANIEL SCHERMAN	10/10/2016

**RECEIVING PARTY DATA**

<b>Name:</b>	CENTRE NATIONAL DE LA RECHERCHE SCIENTIFIQUE (CNRS)
<b>Street Address:</b>	3, RUE MICHEL ANGE
<b>City:</b>	PARIS
<b>State/Country:</b>	FRANCE
<b>Postal Code:</b>	F-75016
<b>Name:</b>	UNIVERSITE PARIS DESCARTES
<b>Street Address:</b>	12, RUE DE L'ECOLE DE MÉDECINE
<b>City:</b>	PARIS
<b>State/Country:</b>	FRANCE
<b>Postal Code:</b>	F-75006
<b>Name:</b>	INSTITUT NATIONAL DE LA SANTE ET DE LA RECHERCHE MEDICALE (INSERM)
<b>Street Address:</b>	101, RUE DE TOLBIAC
<b>City:</b>	PARIS
<b>State/Country:</b>	FRANCE
<b>Postal Code:</b>	F-75013
<b>Name:</b>	ECOLE NATIONALE SUPERIEURE DE CHIMIE DE PARIS
<b>Street Address:</b>	11 RUE PIERRE ET MARIE CURIE
<b>City:</b>	PARIS
<b>State/Country:</b>	FRANCE

**PATENT**

<b>Postal Code:</b>	F-75005
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**PROPERTY NUMBERS Total: 1**

Property Type	Number
Application Number:	15111711

**CORRESPONDENCE DATA**

**Fax Number:** (703)205-8050  
*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:** 703-205-8000  
**Email:** tu.t.tan@bskb.com, mailroom@bskb.com  
**Correspondent Name:** BIRCH, STEWART, KOLASCH & BIRCH, LLP  
**Address Line 1:** P.O. BOX 747  
**Address Line 4:** FALLS CHURCH, VIRGINIA 22040-0747

<b>ATTORNEY DOCKET NUMBER:</b>	3493-0579PUS1
<b>NAME OF SUBMITTER:</b>	TAN T. TU
<b>SIGNATURE:</b>	/Tan T. Tu/
<b>DATE SIGNED:</b>	12/09/2016

**Total Attachments: 17**

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**BIRCH, STEWART, KOLASCH & BIRCH, LLP**  
P.O. Box 747 • Falls Church, Virginia 22040-0747  
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 • Email: mailroom@bskb.com

**DECLARATION AND ASSIGNMENT  
FOR PATENT AND DESIGN APPLICATIONS**

UNITED STATES PATENT RIGHTS, OR  
UNITED STATES PLUS ALL FOREIGN PATENT RIGHTS  
(MULTIPLE ASSIGNEES)

Title of Invention ⇒ **WATER SOLUBLE 4-AZAPODOPHYLLOTOXIN ANALOGS**

As a below named inventor (hereinafter designated as the undersigned), I hereby declare that:

This declaration is directed to the application attached hereto.

Application not Attached ⇒ If the application is not attached hereto, the application is as identified by the attorney docket number as set forth above and/or the following:

Enter Appln. No. ⇒ United States Application Number or PCT International Appln. No. 15/111,711

Enter Filing Date ⇒ filed on July 14<sup>th</sup>, 2016

The above-identified application was made or authorized to be made by me.

I believe that I am the original inventor or an original joint inventor of a claimed invention in the application.

I have reviewed and understand the contents of the above-identified application, including the claims.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

WHEREAS, the undersigned has invented certain new and useful improvements described in the application identified.

Insert Names of Assignees ⇒ WHEREAS, **CENTRE NATIONAL DE LA RECHERCHE SCIENTIFIQUE (CNRS); UNIVERSITE PARIS DESCARTES ; INSTITUT NATIONAL DE LA SANTE ET DE LA RECHERCHE MEDICALE (INSERM); and ECOLE NATIONALE SUPERIEURE DE CHIMIE DE PARIS**  
(hereinafter designated as Assignees)

Insert Addresses of Assignees ⇒ of **3, rue Michel Ange - F-75016 - FRANCE; 12, rue de l'Ecole de Médecine - F-75006 PARIS - FRANCE; 101, rue de Tolbiac - F-75013 PARIS - FRANCE; and 11 rue Pierre et Marie Curie - F-75005 PARIS - FRANCE**, respectively,

their heirs, successors, legal representatives and assigns are desirous of acquiring the entire right, title and interest in and to said invention and in and to any Letters Patent(s) that may be granted therefor in the United States of America and

Check Box if Appropriate ⇒  **in any foreign countries.**

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, the undersigned has (have) sold, assigned and transferred, and by these presents does (do) sell, assign and transfer unto said Assignees the full and exclusive right to the said invention in the United States of America, its territories, dependencies and possessions and the entire right, title and interest in and to any and all Letters Patent(s) which may be granted therefor in the United States of America, its territories, dependencies and possessions, and if the box above is designated, in any and all foreign countries; and to any and all divisions, reissues, continuations, conversions and extensions thereof for the full term or terms for which the same may be granted

in equal undivided amounts unless specific undivided amounts are listed below:

Ownership Interest

⇒ Assignee 1 (25%); Assignee 2 (25%); Assignee 3 (25%); Assignee 4 (25%).

The undersigned agree(s) to execute all papers necessary in connection with this application and any continuing, divisional, conversion or reissue applications thereof and also to execute separate assignments in connection with such applications as the Assignees may deem necessary or expedient.

The undersigned agree(s) to execute all papers necessary in connection with any interference which may be declared concerning this application or continuation, division, conversion or reissue thereof or Letters Patent(s) or reissue patent issued thereon and to cooperate with the Assignees in every way possible in obtaining and producing evidence and proceeding with such interference.

The undersigned agree(s) to execute all papers and documents and to perform any act which may be necessary in connection with claims or provisions of the International Convention for the Protection of Industrial Property or similar agreements.

The undersigned agree(s) to perform all affirmative acts which may be necessary to obtain a grant of (a) valid United States of America patent(s) or a grant of (a) valid United States of America and any foreign patent(s) to the Assignees and to vest all rights therein hereby conveyed to said Assignees as fully and entirely as the same would have been held by the undersigned if this Assignment and sale had not been made.

The undersigned hereby authorize(s) and request(s) the Patent and Trademark Office Officials in the United States of America and in any foreign countries to issue any and all Letters Patent(s) resulting from said application or any continuing, divisional conversion or reissue applications thereof to the said Assignees, as Assignees of the entire interest, and hereby covenants that he has (they have) the full right to convey the entire interest herein assigned, and that he has (they have) not executed, and will not execute, any agreement in conflict herewith.

The undersigned hereby grant(s) the law firm of Birch, Stewart, Kolasch & Birch, LLP the power to insert any further identification which may be necessary or desirable in order to comply with the rules of the U.S. Patent and Trademark Office.

The undersigned hereby covenant(s) that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment.

The undersigned hereby acknowledges that any willful false statement made in this declaration is punishable under 18 U.S.C. § 1001 by fine or imprisonment of not more than five (5) years, or both.

In witness whereof, executed by the undersigned on the date(s) opposite the undersigned name(s).

LEGAL NAME OF INVENTOR

Inventor's Name ⇒ Inventor: Guy CHABOT Date: \_\_\_\_\_

Inventor's Signature ⇒ Signature: \_\_\_\_\_

An application data sheet (PTO/SB/14 or equivalent), including naming the entire inventive entity, must accompany this form. Use a separate form for each inventor; or check the box below and complete the attached page(s) to list additional inventors.

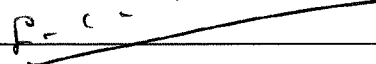
Additional inventors are being named on the 1 supplemental sheet(s) attached hereto.

**SUPPLEMENTAL SHEET FOR  
DECLARATION AND ASSIGNMENT**

**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet Page 1 of 1


LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Sylviane GIORGI-RENAULT Date: July 28<sup>th</sup> 2016

Inventor's Signature ⇨ Signature: 


LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Stéphanie DESBENE-FINCK Date: July 28<sup>th</sup> 2016

Inventor's Signature ⇨ Signature: 

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Philippe HELISSEY Date: JULY 28<sup>th</sup> 2016

Inventor's Signature ⇨ Signature: 

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Raphaël LABRUERE Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Marlène TESTUD Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Daniel SCHERMAN Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: \_\_\_\_\_ Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: \_\_\_\_\_ Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

**SUPPLEMENTAL SHEET FOR  
DECLARATION AND ASSIGNMENT**

**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet Page 1 of 1

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Sylviane GIORGI-RENAULT Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Stéphanie DESBENE-FINCK Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Philippe HELISSEY Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Raphaël LABRUERE Date: 07/28/2016

Inventor's Signature ⇨ Signature: Raphaël LABRUERE

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Marlène TESTUD Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Daniel SCHERMAN Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: \_\_\_\_\_ Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: \_\_\_\_\_ Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

**SUPPLEMENTAL SHEET FOR  
DECLARATION AND ASSIGNMENT**

**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet Page 1 of 1

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Sylviane GIORGI-RENAULT Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Stéphanie DESBENE-FINCK Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Philippe HELISSEY Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Raphaël LABRUERE Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Marlène TESTUD Date: 8-2-16

Inventor's Signature ⇨ Signature: 

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: Daniel SCHERMAN Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: \_\_\_\_\_ Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name ⇨ Inventor: \_\_\_\_\_ Date: \_\_\_\_\_

Inventor's Signature ⇨ Signature: \_\_\_\_\_

**SUPPLEMENTAL SHEET FOR  
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**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet Page 1 of 1

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name → Inventor: Sylviane GIORGI-RENAULT Date: \_\_\_\_\_

Inventor's Signature → Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name → Inventor: Stéphanie DESBENE-FINCK Date: \_\_\_\_\_

Inventor's Signature → Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name → Inventor: Philippe HELISSEY Date: \_\_\_\_\_

Inventor's Signature → Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name → Inventor: Raphaël LABRUERE Date: \_\_\_\_\_

Inventor's Signature → Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name → Inventor: Marlène TESTUD Date: \_\_\_\_\_

Inventor's Signature → Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name → Inventor: Daniel SCHERMAN Date: October 10, 2016

Inventor's Signature → Signature: 

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name → Inventor: \_\_\_\_\_ Date: \_\_\_\_\_

Inventor's Signature → Signature: \_\_\_\_\_

LEGAL NAME OF JOINT INVENTOR, IF ANY

Inventor's Name → Inventor: \_\_\_\_\_ Date: \_\_\_\_\_

Inventor's Signature → Signature: \_\_\_\_\_



Doc code: Oath  
 Document Description: Oath or declaration filed

PTO/AIA/02 (07-13)  
 Approved for use through 04/30/2017. OMB 0651-0032  
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**SUBSTITUTE STATEMENT IN LIEU OF AN OATH OR DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (35 U.S.C. 115(d) AND 37 CFR 1.64)**

<b>Title of Invention</b>	WATER SOLUBLE 4-AZAPODOPHYLLOTOXIN ANALOGS		
This statement is directed to:			
<input type="checkbox"/> The attached application,			
OR			
<input checked="" type="checkbox"/> United States application or PCT international application number <u>EP2015/050702</u> filed on <u>January 15, 2015</u> .			
<b>LEGAL NAME of inventor to whom this substitute statement applies:</b>			
(E.g., Given Name (first and middle (if any)) and Family Name or Surname)			
Guy CHABOT			
Residence (except for a deceased or legally incapacitated inventor):			
City	State	Country	
Mailing Address (except for a deceased or legally incapacitated inventor):			
City	State	Zip	Country
I believe the above-named inventor or joint inventor to be the original inventor or an original joint inventor of a claimed invention in the application.			
The above-identified application was made or authorized to be made by me.			
I hereby acknowledge that any willful false statement made in this statement is punishable under 18 U.S.C. 1001 by fine or imprisonment of not more than five (5) years, or both.			
Relationship to the inventor to whom this substitute statement applies:			
<input type="checkbox"/> Legal Representative (for deceased or legally incapacitated inventor only),			
<input checked="" type="checkbox"/> Assignee,			
<input type="checkbox"/> Person to whom the inventor is under an obligation to assign,			
<input type="checkbox"/> Person who otherwise shows a sufficient proprietary interest in the matter (petition under 37 CFR 1.46 is required), or			
<input type="checkbox"/> Joint Inventor.			

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## SUBSTITUTE STATEMENT

Circumstances permitting execution of this substitute statement:

- Inventor is deceased,
- Inventor is under legal incapacity,
- Inventor cannot be found or reached after diligent effort, or
- Inventor has refused to execute the oath or declaration under 37 CFR 1.63.

If there are joint inventors, please check the appropriate box below:

- An application data sheet under 37 CFR 1.76 (PTO/AIA/14 or equivalent) naming the entire inventive entity has been or is currently submitted.
- OR
- An application data sheet under 37 CFR 1.76 (PTO/AIA/14 or equivalent) has not been submitted. Thus, a Substitute Statement Supplemental Sheet (PTO/AIA/11 or equivalent) naming the entire inventive entity and providing inventor information is attached. See 37 CFR 1.64(b).

### WARNING:

Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.

### PERSON EXECUTING THIS SUBSTITUTE STATEMENT:

Name: Ludovic HAMON	20 SEP. 2016 Date (Optional):
Signature: 	

### APPLICANT NAME AND TITLE OF PERSON EXECUTING THIS SUBSTITUTE STATEMENT:

If the applicant is a juristic entity, list the applicant name and the title of the signer:

**CENTRE NATIONAL DE LA RECHERCHE SCIENTIFIQUE (CNRS)**

Applicant Name:

Title of Person Executing This Substitute Statement: Deputy Director for Industrial Partnership and Transfer of Innovation

The signer, whose title is supplied above, is authorized to act on behalf of the applicant.

Residence of the signer (unless provided in an application data sheet, PTO/AIA/14 or equivalent):

City	State	Country <b>FRANCE</b>	
Mailing Address of the signer (unless provided in an application data sheet, PTO/AIA/14 or equivalent)			
City	State	Zip	Country

Note: Use an additional PTO/AIA/02 form for each inventor who is deceased, legally incapacitated, cannot be found or reached after diligent effort, or has refused to execute the oath or declaration under 37 CFR 1.63.

Doc code: Oath  
 Document Description: Oath or declaration filed

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<b>Title of Invention</b>	WATER SOLUBLE 4-AZAPODOPHYLLOTOXIN ANALOGS		
This statement is directed to:			
<input type="checkbox"/> The attached application, OR <input checked="" type="checkbox"/> United States application or PCT international application number <u>EP2015/050702</u> filed on <u>January 15, 2015</u>			
<b>LEGAL NAME of inventor to whom this substitute statement applies:</b>			
(E.g., Given Name (first and middle (if any)) and Family Name or Surname)			
Guy CHABOT			
Residence (except for a deceased or legally incapacitated inventor):			
City	State	Country	
Mailing Address (except for a deceased or legally incapacitated inventor):			
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I believe the above-named inventor or joint inventor to be the original inventor or an original joint inventor of a claimed invention in the application.  The above-identified application was made or authorized to be made by me.  I hereby acknowledge that any willful false statement made in this statement is punishable under 18 U.S.C. 1001 by fine or imprisonment of not more than five (5) years, or both.			
Relationship to the inventor to whom this substitute statement applies:			
<input type="checkbox"/> Legal Representative (for deceased or legally incapacitated inventor only), <input checked="" type="checkbox"/> Assignee, <input type="checkbox"/> Person to whom the inventor is under an obligation to assign, <input type="checkbox"/> Person who otherwise shows a sufficient proprietary interest in the matter (petition under 37 CFR 1.46 is required), or <input type="checkbox"/> Joint Inventor.			

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

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 Inventor cannot be found or reached after diligent effort, or  
 Inventor has refused to execute the oath or declaration under 37 CFR 1.63.

If there are joint inventors, please check the appropriate box below:

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OR  
 An application data sheet under 37 CFR 1.76 (PTO/AIA/14 or equivalent) has not been submitted. Thus, a Substitute Statement Supplemental Sheet (PTO/AIA/11 or equivalent) naming the entire inventive entity and providing inventor information is attached. See 37 CFR 1.64(b).

**WARNING:**

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**PERSON EXECUTING THIS SUBSTITUTE STATEMENT:**Name: Frédéric DARDEL Date (Optional): 2/16/2010Signature: **APPLICANT NAME AND TITLE OF PERSON EXECUTING THIS SUBSTITUTE STATEMENT:**

If the applicant is a juristic entity, list the applicant name and the title of the signer:

**UNIVERSITE PARIS DESCARTES**

Applicant Name:

Title of Person Executing  
This Substitute Statement: President

The signer, whose title is supplied above, is authorized to act on behalf of the applicant.

**Residence of the signer (unless provided in an application data sheet, PTO/AIA/14 or equivalent):**City \_\_\_\_\_ State \_\_\_\_\_ Country **FRANCE****Mailing Address of the signer (unless provided in an application data sheet, PTO/AIA/14 or equivalent)**

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Note: Use an additional PTO/AIA/02 form for each inventor who is deceased, legally incapacitated, cannot be found or reached after diligent effort, or has refused to execute the oath or declaration under 37 CFR 1.63.

Doc code: Oath  
 Document Description: Oath or declaration filed

PTO/AIA/02 (07-13)  
 Approved for use through 04/30/2017. OMB 0651-0032  
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**SUBSTITUTE STATEMENT IN LIEU OF AN OATH OR DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (35 U.S.C. 115(d) AND 37 CFR 1.64)**

<b>Title of Invention</b>	WATER SOLUBLE 4-AZAPODOPHYLLOTOXIN ANALOGS		
This statement is directed to:			
<input type="checkbox"/> The attached application,			
OR			
<input checked="" type="checkbox"/> United States application or PCT international application number <u>EP2015/050702</u> filed on <u>January 15, 2015</u>			
<b>LEGAL NAME of inventor to whom this substitute statement applies:</b>			
(E.g., Given Name (first and middle (if any)) and Family Name or Surname)			
Guy CHABOT			
Residence (except for a deceased or legally incapacitated inventor):			
City	State	Country	
Mailing Address (except for a deceased or legally incapacitated inventor):			
City	State	Zip	Country
I believe the above-named inventor or joint inventor to be the original inventor or an original joint inventor of a claimed invention in the application.			
The above-identified application was made or authorized to be made by me.			
I hereby acknowledge that any willful false statement made in this statement is punishable under 18 U.S.C. 1001 by fine or imprisonment of not more than five (5) years, or both.			
Relationship to the inventor to whom this substitute statement applies:			
<input type="checkbox"/> Legal Representative (for deceased or legally incapacitated inventor only),			
<input checked="" type="checkbox"/> Assignee,			
<input type="checkbox"/> Person to whom the inventor is under an obligation to assign,			
<input type="checkbox"/> Person who otherwise shows a sufficient proprietary interest in the matter (petition under 37 CFR 1.46 is required), or			
<input type="checkbox"/> Joint Inventor.			

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

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**SUBSTITUTE STATEMENT**

Circumstances permitting execution of this substitute statement:

- Inventor is deceased,  
 Inventor is under legal incapacity,  
 Inventor cannot be found or reached after diligent effort, or  
 Inventor has refused to execute the oath or declaration under 37 CFR 1.63.

If there are joint inventors, please check the appropriate box below:

- An application data sheet under 37 CFR 1.76 (PTO/AIA/14 or equivalent) naming the entire inventive entity has been or is currently submitted.


OR

- An application data sheet under 37 CFR 1.76 (PTO/AIA/14 or equivalent) has not been submitted. Thus, a Substitute Statement Supplemental Sheet (PTO/AIA/11 or equivalent) naming the entire inventive entity and providing inventor information is attached. See 37 CFR 1.64(b).

**WARNING:**

Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identify theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.

**PERSON EXECUTING THIS SUBSTITUTE STATEMENT:**

Name: <b>Denise HIRSCH</b> Director, Protection and Institutional Partnerships		Date (Optional):
Signature:  <b>L'INSEHM</b> <b>Pour le Directeur Général</b> <b>et par délégation</b>		

**APPLICANT NAME AND TITLE OF PERSON EXECUTING THIS SUBSTITUTE STATEMENT:**

If the applicant is a juristic entity, list the applicant name and the title of the signer:

**INSTITUT NATIONAL DE LA SANTE ET DE LA RECHERCHE MEDICALE (INSERM)**

Applicant Name:

Title of Person Executing

This Substitute Statement:

The signer, whose title is supplied above, is authorized to act on behalf of the applicant.

**Residence of the signer (unless provided in an application data sheet, PTO/AIA/14 or equivalent):**

City	State	Country <b>FRANCE</b>
------	-------	-----------------------

**Mailing Address of the signer (unless provided in an application data sheet, PTO/AIA/14 or equivalent)**

City	State	Zip	Country
------	-------	-----	---------

Note: Use an additional PTO/AIA/02 form for each inventor who is deceased, legally incapacitated, cannot be found or reached after diligent effort, or has refused to execute the oath or declaration under 37 CFR 1.63.

[Page 2 of 2]

**INSTITUT NATIONAL de la SANTE  
et de la RECHERCHE MEDICALE**  
101, rue de Tolbiac  
75013 PARIS - FRANCE

**PATENT**  
**REEL: 040869 FRAME: 0140**

Doc code: Oath  
 Document Description: Oath or declaration filed

PTO/IAIAS2 (07-13)  
 Approved for use through 04/30/2017. GMB 0661-0032  
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(E.g., Given Name (first and middle (if any)) and Family Name or Surname)	
Guy CHABOT	
Residence (except for a deceased or legally incapacitated inventor):	
City	State Country
Mailing Address (except for a deceased or legally incapacitated inventor):	
City	State Zip Country
I believe the above-named inventor or joint inventor to be the original inventor or an original joint inventor of a claimed invention in the application.	
The above-identified application was made or authorized to be made by me.	
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<input checked="" type="checkbox"/> Assignee,	
<input type="checkbox"/> Person to whom the inventor is under an obligation to assign,	
<input type="checkbox"/> Person who otherwise shows a sufficient proprietary interest in the matter (petition under 37 CFR 1.46 is required), or	
<input type="checkbox"/> Joint Inventor.	

[Page 1 of 2]

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If you need assistance in completing the form, call 1-800-PTO-0199 and select option 2.



PATENT *NT*

## SUBSTITUTE STATEMENT

Circumstances permitting execution of this substitute statement:

- Inventor is deceased,  
 Inventor is under legal incapacity,  
 Inventor cannot be found or reached after diligent effort, or  
 Inventor has refused to execute the oath or declaration under 37 CFR 1.63.

If there are joint inventors, please check the appropriate box below.


- An application data sheet under 37 CFR 1.76 (PTO/AIA/14 or equivalent) naming the entire inventive entity has been or is currently submitted.  
 OR  
 An application data sheet under 37 CFR 1.76 (PTO/AIA/14 or equivalent) has not been submitted. Thus, a Substitute Statement Supplemental Sheet (PTO/AIA/11 or equivalent) naming the entire inventive entity and providing inventor information is attached. See 37 CFR 1.64(b).

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### PERSON EXECUTING THIS SUBSTITUTE STATEMENT:

Name: TATOUMAN NICHAI Date (Optional): 25/08/2016

Signature: 

### APPLICANT NAME AND TITLE OF PERSON EXECUTING THIS SUBSTITUTE STATEMENT:

If the applicant is a juristic entity, list the applicant name and the title of the signer:

**ECOLE NATIONALE SUPERIEURE DE CHIMIE DE PARIS**

Applicant Name:

Title of Person Executing This Substitute Statement: Deputy Director of ENSCP

The signer, whose title is supplied above, is authorized to act on behalf of the applicant.

Residence of the signer (unless provided in an application data sheet, PTO/AIA/14 or equivalent):

City PARIS State \_\_\_\_\_ Country FRANCE

Mailing Address of the signer (unless provided in an application data sheet, PTO/AIA/14 or equivalent)

11 RUE PIERRE ET MARIE CURIE

City PARIS State \_\_\_\_\_ Zip 75005 Country FRANCE

Note: Use an additional PTO/AIA/02 form for each inventor who is deceased, legally incapacitated, cannot be found or reached after diligent effort, or has refused to execute the oath or declaration under 37 CFR 1.63. P / Le Directeur de l'ENSCP

(Page 2 of 2)

et par délégation  
Le Directeur Adjoint







## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT4147770

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
GUY CHABOT	09/20/2016
SYLVIANE GIORGI-RENAULT	07/28/2016
STÉPHANIE DESBENE-FINCK	07/28/2016
PHILIPPE HELISSEY	07/28/2016
RAPHAËL LABRUERE	07/28/2016
MARLÈNE TESTUD	08/02/2016
DANIEL SCHERMAN	10/10/2016
<b>RECEIVING PARTY DATA</b>	
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<b>State/Country:</b>	FRANCE
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<b>State/Country:</b>	FRANCE
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<b>Name:</b>	ECOLE NATIONALE SUPERIEURE DE CHIMIE DE PARIS
<b>Street Address:</b>	11 RUE PIERRE ET MARIE CURIE
<b>City:</b>	PARIS
<b>State/Country:</b>	FRANCE
<b>Postal Code:</b>	F-75005
<b>PROPERTY NUMBERS Total: 1</b>	
<b>PATENT</b>	