

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT4270384

SUBMISSION TYPE:	CORRECTIVE ASSIGNMENT
NATURE OF CONVEYANCE:	Corrective Assignment to correct the RECEIVING PARTY DATA ERROR, LEFT OFF COMMA IN COMPANY NAME previously recorded on Reel 036457 Frame 0629. Assignor(s) hereby confirms the RECEIVING PARTY IS CUREMARK, LLC.
CONVEYING PARTY DATA	
Name	Execution Date
JOAN M. FALLON	08/31/2009
MATTHEW HEIL	08/31/2009
RECEIVING PARTY DATA	
Name:	CUREMARK, LLC
Street Address:	411 THEODORE FREMD AVE.
Internal Address:	SUITE 206 S.
City:	RYE
State/Country:	NEW YORK
Postal Code:	10580
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14693711
CORRESPONDENCE DATA	
Fax Number:	(858)350-2399
<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:	8583502300
Email:	asgarcia@wsgr.com
Correspondent Name:	WILSON SONSINI GOODRICH & ROSATI
Address Line 1:	650 PAGE MILL ROAD
Address Line 4:	PALO ALTO, CALIFORNIA 94304
ATTORNEY DOCKET NUMBER:	41012-703.403
NAME OF SUBMITTER:	ASHLEY GARCIA
SIGNATURE:	/Ashley Garcia/
DATE SIGNED:	02/10/2017
Total Attachments: 4	
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PATENT ASSIGNMENT COVER SHEET

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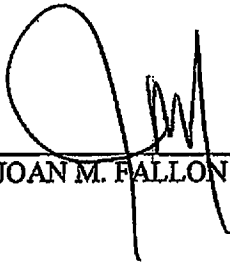
EPAS ID: PAT3506136

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
JOAN M. FALLON	08/31/2009
MATTHEW HEIL	08/31/2009
RECEIVING PARTY DATA	
Name:	CUREMARK LLC
Street Address:	411 THEODORE FREMD AVENUE
Internal Address:	SUITE 206 SOUTH
City:	RYE
State/Country:	NEW YORK
Postal Code:	10580
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	14693711
CORRESPONDENCE DATA	
Fax Number:	(650)493-6811
<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:	650-493-9300
Email:	patentdocket@wsgr.com
Correspondent Name:	WILSON SONSINI GOODRICH & ROSATI
Address Line 1:	650 PAGE MILL ROAD
Address Line 4:	PALO ALTO, CALIFORNIA 94304-1050
ATTORNEY DOCKET NUMBER:	41012-703.403
NAME OF SUBMITTER:	LINDA ANDERS
SIGNATURE:	/Linda Anders/
DATE SIGNED:	08/31/2015
Total Attachments: 3	
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ASSIGNMENT

For valuable consideration, we, Joan M. Fallon, of 1180 Midland Avenue, Bronxville, NY 10708; Mathew Heil, of 47 Timber Lake Road, Sherman, CT 06784; hereby assign to CUREMARK, LLC, a corporation of Delaware, having a place of business at 411 Theodore Fremd Avenue, Suite 206 South, Rye, NY 10580, NY 10580, and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of an application for United States Patent signed by me, entitled ENZYMES DELIVERY SYSTEM, filed April 13, 2009, and assigned U.S. Serial Number 12/386,051, this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in my name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and we agree for me and my respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

DATE: 8/31/09

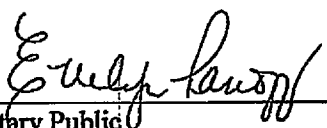


JOAN M. FALLON

STATE OF New York)
COUNTY OF Westchester) SS.

On August 31, 2009, before me, the undersigned, a notary public for the State of New York, there personally appeared JOAN M. FALLON personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in her authorized capacity and that by her signature on this Assignment, the person or the entity upon behalf of which she acted, executed this Assignment.


WITNESS my hand and official seal.



Notary Public

EVELYN PANOFF
Notary Public, State of New York
No. 01PA6045887
Qualified in Westchester County
Commission Expires July 31, 2010

DATE: 8/31/09


MATTHEW HEIL

STATE OF New York)
COUNTY OF Westchester) SS.

On August 31, 2009, before me, the undersigned, a notary public for the State of New York, there personally appeared MATTHEW HEIL personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.


Notary Public

EVELYN PANOFF
Notary Public, State of New York
No. 01PA6045887
Qualified in Westchester County
Commission Expires July 31, 2010

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