

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT4455669

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
WINTHROP UNIVERSITY HOSPITAL	03/31/2017
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	NYU WINTHROP HOSPITAL
<b>Street Address:</b>	259 FIRST STREET
<b>City:</b>	MINEOLA
<b>State/Country:</b>	NEW YORK
<b>Postal Code:</b>	11501
<b>PROPERTY NUMBERS Total: 3</b>	
<b>Property Type</b>	<b>Number</b>
<b>Patent Number:</b>	9127317
<b>Patent Number:</b>	6380248
<b>Application Number:</b>	14966526
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	
<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>	
<b>Phone:</b>	212-382-0700
<b>Email:</b>	dkatz@ostrolenk.com
<b>Correspondent Name:</b>	KEITH J. BARKAUS
<b>Address Line 1:</b>	OSTROLENK FABER LLP
<b>Address Line 2:</b>	1180 AVENUE OF THE AMERICAS
<b>Address Line 4:</b>	NEW YORK, NEW YORK 10036
<b>ATTORNEY DOCKET NUMBER:</b>	2526-1
<b>NAME OF SUBMITTER:</b>	KEITH J. BARKAUS
<b>SIGNATURE:</b>	/Keith J. Barkaus/
<b>DATE SIGNED:</b>	06/12/2017
<b>Total Attachments: 2</b>	
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# NYS Department of State

## Division of Corporations

### Entity Information

The information contained in this database is current through April 12, 2017.

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Selected Entity Name: NYU WINTHROP HOSPITAL

Selected Entity Status Information

**Current Entity Name:** NYU WINTHROP HOSPITAL

**DOS ID #:** 14420

**Initial DOS Filing Date:** SEPTEMBER 08, 1896

**County:** NASSAU

**Jurisdiction:** NEW YORK

**Entity Type:** DOMESTIC NOT-FOR-PROFIT CORPORATION

**Current Entity Status:** ACTIVE

Selected Entity Address Information

**DOS Process (Address to which DOS will mail process if accepted on behalf of the entity)**

NYU WINTHROP HOSPITAL

ATTN: CHIEF EXECUTIVE OFFICER

259 FIRST STREET

MINEOLA, NEW YORK, 11501

**Registered Agent**

NONE

This office does not record information regarding the names and addresses of officers, shareholders or directors of nonprofessional corporations except the chief executive officer, if provided, which would be listed above. Professional corporations must include the name(s) and address(es) of the initial officers, directors, and shareholders in the initial certificate of incorporation, however this information is not recorded and only available by [viewing the certificate](#).

**\*Stock Information**

# of Shares	Type of Stock	\$ Value per Share
No Information Available		

\*Stock information is applicable to domestic business corporations.

**Name History**

Filing Date	Name Type	Entity Name
MAR 31, 2017	Actual	NYU WINTHROP HOSPITAL
MAY 18, 1987	Actual	WINTHROP-UNIVERSITY HOSPITAL ASSOCIATION
SEP 08, 1896	Actual	NASSAU HOSPITAL ASSOCIATION

A **Fictitious** name must be used when the **Actual** name of a foreign entity is unavailable for use in New York State. The entity must use the fictitious name when conducting its activities or business in New York State.

NOTE: New York State does not issue organizational identification numbers.

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