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PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:		NEW ASSIGNMENT	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:		ASSIGNMENT	ASSIGNMENT		
CONVEYING PARTY	DATA				
		Name		Execution Date	
SYMMETRY MEDICA	L, INC.			07/10/2017	
	ΑΤΑ				
Name:		SYMMETRY MEDICAL MANUFACTURING, INC.			
Street Address:	3724 N	3724 NORTH STATE ROAD 15			
City:	WARSA	WARSAW			
State/Country:	INDIAN	INDIANA			
Postal Code:	46582	46582			
PROPERTY NUMBER	RS Total: 1				
Property Type		Number			
Application Number: 142		4285176			
CORRESPONDENCE					
Fax Number:		260)897-9300 the e-mail address first, if the	t io unoucooco	ul it will be cont	
		the e-mail address first; if that if that is unsuccessful, it will			
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Email:		260-897-3400 Icyr@taylorip.com			
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) e:	lcyr@taylorip.com			
Correspondent Name) •: -	lcyr@taylorip.com AYLOR IP, P.C.			
Correspondent Name Address Line 1:	e:	lcyr@taylorip.com AYLOR IP, P.C. P.O. BOX 560			
Correspondent Name Address Line 1: Address Line 2: Address Line 4:	9: - - -	dcyr@taylorip.com TAYLOR IP, P.C. P.O. BOX 560 42 S. MAIN STREET			
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Correspondent Name Address Line 1: Address Line 2:	e: - - - - - - - - - - - - - - - - - - -	Acyr@taylorip.com TAYLOR IP, P.C. P.O. BOX 560 42 S. MAIN STREET AVILLA, INDIANA 46710 SMI0205.US	36945/		
Correspondent Name Address Line 1: Address Line 2: Address Line 4: ATTORNEY DOCKET	e: - - - - - - - - - - - - - - - - - - -	Acyr@taylorip.com TAYLOR IP, P.C. P.O. BOX 560 42 S. MAIN STREET AVILLA, INDIANA 46710 SMI0205.US TODD T. TAYLOR	36945/		
Correspondent Name Address Line 1: Address Line 2: Address Line 4: ATTORNEY DOCKET I NAME OF SUBMITTER	e: - - - - - - - - - - - - - - - - - - -	Acyr@taylorip.com TAYLOR IP, P.C. P.O. BOX 560 42 S. MAIN STREET AVILLA, INDIANA 46710 SMI0205.US TODD T. TAYLOR /Todd T. Taylor, Reg. No. 3	36945/		
Correspondent Name Address Line 1: Address Line 2: Address Line 4: ATTORNEY DOCKET I NAME OF SUBMITTER SIGNATURE: DATE SIGNED:	e:	Acyr@taylorip.com TAYLOR IP, P.C. P.O. BOX 560 42 S. MAIN STREET AVILLA, INDIANA 46710 SMI0205.US TODD T. TAYLOR /Todd T. Taylor, Reg. No. 3	36945/		

ASSIGNMENT

WHEREAS, Symmetry Medical, Inc., a corporation of the State of Indiana, having a business address of 3724 North State Road 15, Warsaw, Indiana 46582, is the owner by Assignment of the following U.S. Patent Application:

U.S. Patent Application Serial No. 14/285,176 Filed: May 22, 2014 Title: OFFSET ORTHOPAEDIC REAMER HANDLE

WHEREAS, Symmetry Medial Manufacturing, Inc., a corporation organized and existing under the laws of the State of Indiana, having its principal place of business at 3724 North State Road 15, Warsaw, Indiana 46582, is to acquire the entire right, title and interest in and to said Letters Patent;

NOW, THEREFORE, in consideration of the sum of TEN DOLLARS (\$10.00) to Symmetry Medical, Inc. in hand paid, and for other good and valuable consideration, the receipt and sufficiency whereof is hereby acknowledged, Symmetry Medical, Inc. does hereby assign, sell, transfer and set over unto said Symmetry Medical Manufacturing, Inc., its successors and assigns, the full, entire and exclusive right, title and interest, for the territory of the United States of America and for all foreign countries, in and to said patent, reissues, renewals or extensions thereof which have been or may be granted; said patent to be held and enjoyed by said Symmetry Medical Manufacturing, Inc., and its successors or assigns, to the full end of the terms for which said patents have been granted, as fully and entirely as the same would have been held by Symmetry Medical, Inc. had this assignment not been made.

This Assignment is effective on the date of execution indicated below.

SYMMETRY MEDICAL, INC. - Connol John Connolly RICHARD J. GANEM <u>a</u> Chief Financial Officer Notary Public COMMONWEALTH OF MASSACHUSETTS My Commission Expires STATE OF INDIANA MA June 1, 2023) ss: COUNTY OF

Before me, the undersigned, a Notary Public in and for said County and State, this day personally appeared John Connolly, to me well known, who acknowledged the execution of the foregoing instrument as his free act and deed.

Sichaloff Som Notary Public

County of Residence: <u>ESSEX</u>

My Commission Expires:

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PATENT REEL: 042955 FRAME: 0618

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Patent of Stuart Weekes et al. Serial No.: 14/285,176 Filing Date: May 22, 2014 Title: OFFSET ORTHOPAEDIC REAMER HANDLE

) Group Art Unit: 3679)) Examiner: Ferguson, Michael P.

CERTIFICATE UNDER 37 C.F.R. 3.73(b)

Assistant Commissioner for Patents Washington, DC 20231

Sir:

Symmetry Medical, Inc., a corporation of the State of Indiana, certifies that it is the assignee of the entire right, title and interest in the patent application identified above by virtue of an assignment from the inventor of the patent identified above. The assignment was recorded in the Patent and Trademark Office on June 20, 2014, at Reel 033145, Frames 0391.

The undersigned has reviewed all the documents in the chain of title of the patent identified above and, to the best of undersigned's knowledge and belief, title is in the assignee identified above.

The undersigned, whose title is supplied below, is empowered to sign this certificate on behalf of the assignee.

I hereby declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further, that these statements are made with the knowledge that willful false statements, and the like so made are punishable by fine or imprisonment or both, under Section 1001, Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Dated this $10^{7\text{H}}$ day of 50 LV, 2017.

ame: John Connolly

Chief Financial Office

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RECORDED: 07/10/2017