

PATENT ASSIGNMENT COVER SHEET

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Stylesheet Version v1.2

EPAS ID: PAT4700519

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
GREG J. DUGAN	11/17/2016
RECEIVING PARTY DATA	
Name:	VYAIRE MEDICAL CAPITAL LLC
Street Address:	8500 NORMANDALE LAKE BOULEVARD
Internal Address:	SUITE 1080
City:	BLOOMINGTON
State/Country:	MINNESOTA
Postal Code:	55437
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	29582280
CORRESPONDENCE DATA	
Fax Number:	(949)851-9348
<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>	
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Email:	mbutler@mwe.com
Correspondent Name:	MCDERMOTT WILL & EMERY LLP
Address Line 1:	4 PARK PLAZA
Address Line 2:	SUITE 1700
Address Line 4:	IRVINE, CALIFORNIA 92614
ATTORNEY DOCKET NUMBER:	101675-0889
NAME OF SUBMITTER:	M. TODD HALES
SIGNATURE:	/M. Todd Hales/
DATE SIGNED:	11/21/2017
Total Attachments: 2	
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ASSIGNMENT

WHEREAS I, Greg J. Dugan of 3475 New York Drive, Corona, California 92887; have made a certain new and useful invention as set forth in a design application for United States Letters Patent, entitled SENSOR PORT which was filed on October 26, 2016; and identified by United States Design Patent Application No. 29/582,280.

AND WHEREAS, Vyaire Medical Capital LLC, a limited liability company of the State of Delaware and having an address of 8500 Normandale Lake Boulevard, Suite 1080, Bloomington, Minnesota 55437 is desirous of acquiring the entire right, title and interest in and to said invention and in and to any and all Letters Patent of the United States and foreign countries which may be obtained therefor;

NOW, THEREFORE, for good and valuable consideration, the receipt for and sufficiency of which is hereby acknowledged, I do hereby sell, assign, transfer and set over unto Vyaire Medical Capital LLC, its legal representatives, successors, and assigns, the entire right, title and interest in and to said invention as set forth in the above-mentioned application, including the right of priority and including any continuations, continuations-in-part, divisions, reissues, re-examinations or extensions thereof, and in and to any and all patents of the United States and foreign countries which may be issued for said invention;

UPON SAID CONSIDERATIONS, I hereby agree with the said assignee that I will not execute any writing or do any act whatsoever conflicting with these presents, and that I will, at any time upon request, without further or additional consideration but at the expense of said assignee, execute such additional assignments and other writings and do such additional acts as said assignee may deem necessary or desirable to perfect the assignee's enjoyment of this grant, and render all necessary assistance in making application for and obtaining original, divisional, continuations, continuations-in-part, reexamined, reissued, or extended Letters Patent of the United States or of any and all foreign countries on said invention, and in enforcing any rights or choses in action accruing as a result of such applications or patents, by giving testimony in any proceedings or transactions involving such applications or patents, and by executing preliminary statements and other affidavits, it being understood that the foregoing covenant and agreement shall bind, and inure to the benefit of the assigns and legal representatives of assignor and assignee;

AND I request the Commissioner for Patents and Trademarks to issue any Letters Patent of the United States which may be issued for said invention to said Vyaire Medical Capital LLC, its legal representatives, successors or assigns, as the sole owner of the entire right, title and interest in and to said patent and the invention covered thereby.

11/17/2016
Date

Greg J. DUGAN
Greg J. DUGAN

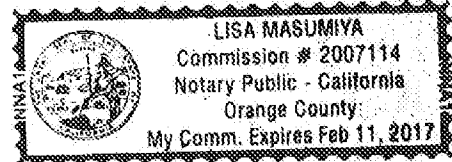
State of CALIF)
County of ORANGE)

On NOV. 17, 2016 before me, LISA MASUMIYA - NOTARY, personally appeared GREG DUGAN who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and Acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of _____ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

Lisa Masumiya
Notary Public



NOTARY PUBLIC SEAL