504790673 02/23/2018

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

EPAS ID: PAT4837405

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
NORMAN YOUNG	10/21/2015
THANH DUC HUYNH	10/21/2015
JONATHAN EDWARD RESNICK	10/21/2015
STEVEN RICHARD WRANOKSKY	10/23/2015
WESLEY BRYAN HODGES	10/21/2015

RECEIVING PARTY DATA

Name:	SYNAPTIVE MEDICAL (BARBADOS) INC.
Street Address:	CHANCERY HOUSE
Internal Address:	HIGH STREET
City:	BRIDGETOWN
State/Country:	BARBADOS

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	14866007

CORRESPONDENCE DATA

Fax Number: (651)351-2954

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.

Email: jbarnes@kaganbinder.com KAGAN BINDER PLLC **Correspondent Name:** Address Line 1: 221 MAIN STREET NORTH

Address Line 2: SUITE 200

Address Line 4: STILLWATER, MINNESOTA 55082

ATTORNEY DOCKET NUMBER:	75590011 (DWW0088US)
NAME OF SUBMITTER:	JENNIFER BARNES
SIGNATURE:	/Jennifer Barnes/
DATE SIGNED:	02/23/2018

Total Attachments: 8

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WORLDWIDE ASSIGNMENT

WE, Norman YOUNG (full postal address: 620-438 Richmond St. W., Toronto, Ontario, M5V 3S6, CANADA), Thanh Duc HUYNH (full postal address: 154 Peshawar Ave, Markham, Ontario L3R 0W8, CANADA), Jonathan Edward RESNICK (full postal address: 50 Camden St. Unit 302, Toronto, Ontario M5V 3N1 CANADA), Steven Richard WRANOKSKY (full postal address: S73 W15033 Candlewood Lane, Muskego, WI 53150, USA), Wesley Bryan HODGES (full postal address: 1280 Gagel Street, London, Ontario, N6K 4V3 CANADA), and Jasper YEH (full postal address: 115-900 Steeles Ave W, Thornhill, Ontario, L4J 8C2, CANADA) have invented, METHOD AND SYSTEM FOR MEDICAL DATA DISPLAY, for which the US application was filed:

Filing Date: 9/25/2015 Serial No. 14/866007

and in consideration of Two Dollars (\$2.00) to each of us, paid in hand, the receipt and sufficiency of which is hereby acknowledged, and other good and valuable consideration, WE by these presents confirm that WE have sold, transferred and assigned and do hereby sell, transfer and assign to SYNAPTIVE MEDICAL (BARBADOS) INC., ("Assignee"), having offices at, Chancery House, High Street, Bridgetown, Barbados, its successors and assigns or nominees, all OUR rights, title and interest in all the countries of the world in and to OUR invention as fully described in the patent application, and WE sell, transfer and assign to SYNAPTIVE MEDICAL (BARBADOS) INC. all OUR rights to apply for patent on said invention and all OUR priority rights that derive from any such applications in all the countries of the world including any and all full utility applications, divisions, continuations, continuation-in-part, re-examinations, renewals, reissues and/or extensions thereof, any design applications originating therefrom, patent applications and all national phase applications and all OUR corresponding rights, title and interest in and to any patent which may issue therefor in all the countries of the world, to have and to hold for SYNAPTIVE MEDICAL (BARBADOS) INC.'s own use and SYNAPTIVE MEDICAL (BARBADOS) INC.'s successors and assigns as fully and entirely as the same might be held by us if this sale had not been made, and we each make this assignment independently of each other.

AND WE HEREBY authorize Assignee, its successors, assigns, or nominees, to invoke and claim for any applications for patent or other form or protection filed, the benefit of the right of priority provided by the International Convention for the Protection of Industrial Property, as amended, or by any convention which may henceforth be substituted for it, and to invoke and claim such right of priority without need for further written or oral authorization;

ACCEPTANCE

The Assigne	e accepts this assignment.
Signed at To	pronto, Ontario, CANADA, this 2 day of October, 2015.
SYNAPTIVE	MEDICAL (BARBADOS) INC.
Signature:	
Name:	Cameron Anthony Piron
Title:	Director and President, Synaptive Medical (Barbados) Inc.
	DECLARATION OF WITNESS
Ontario L7P Cameron A	s, whose full post office address is 2-2226 Upper Middle Road, Burlington, 2Z9 CANADA, hereby declare that I was personally present and did see nthony PIRON who is personally known to me to be the person named sign and execute the above on behalf of SYNAPTIVE MEDICAL S) INC.
DECLARED	at Toronto, Ontario, CANADA, this 2 day of October, 2015.
	ones

AND WE IRREVOCABLY CONSENT and agree that any and all applications for patent or other form of protection may be applied for in OUR names, the personal names of the inventors, without further consideration;

AND WE UNDERTAKE to sign such further documents to effect the aforesaid sale, assignment and transfer as may be required from time to time, without further consideration, but at the expense of **SYNAPTIVE MEDICAL (BARBADOS) INC.**

This assignment can be signed in counterparts.

SIGNED at Toronto, Ontario	o, CANADA, this 21°t day of October, 2015
I own	day of October, 2013
Norman YOUNG	
	DECLARATION OF WITNESS

I, **Maia Jones**, full post office address being 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see **Norman YOUNG** who is personally known to me to be the person named in the above assignment duly sign and execute the same.

DECLARED at Toronto, Ontario, CANADA, this Alam day of October, 2015.

Maia Jones

SIGNED at Toronto, Ontario, CANADA, this ______ day of October, 2015.

Wesley Bryan HODGES

DECLARATION OF WITNESS

I, Maia Jones, full post office address being 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see Wesley Bryan HODGES who is personally known to me to be the person named in the above assignment duly sign and execute the same.

DECLARED at Toronto, Ontario, CANADA, this 2 day of October, 2015.

Maia Jones

SIGNED at Toronto, Ontario	o, CANADA, this 2/ day of October, 2015.
Jasper YEH	
	DECLARATION OF WITNESS

I, **Maia Jones**, full post office address being 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see **Jasper YEH** who is personally known to me to be the person named in the above assignment duly sign and execute the same.

DECLARED at Toronto, Ontario, CANADA, this 21 day of October, 2015.

Maia Jones

SIGNED at Toronto, Ontario, CANADA, this	2)st day of October, 2015.
<u> </u>	
Thanh Duc HUYNH	-

DECLARATION OF WITNESS

I, **Maia Jones**, full post office address being 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see **Thanh Duc HUYNH** who is personally known to me to be the person named in the above assignment duly sign and execute the same.

DECLARED at Toronto, Ontario, CANADA, this 1 day of October, 2015.

Maia Jones

SIGNED a	t Toronto, Ontario, CANADA, this 21 day of October, 2015.
	M
Jonathan	Edward RESNICK
	DECLARATION OF WITNESS
Jonathan	nes, full post office address being 2-2226 Upper Middle Road, Burlington, P 2Z9 CANADA, hereby declare that I was personally present and did see Edward RESNICK who is personally known to me to be the person named in assignment duly sign and execute the same.
DECLARE	D at Toronto, Ontario, CANADA, this 21 day of October, 2015.

SIGNED at Toronto, Ontario, CANADA, this 23 day of October, 2015.

Steven Richard WRANOVSKY

DECLARATION OF WITNESS

I, Maia Jones, full post office address being 2-2226 Upper Middle Road, Burlington, Ontario L7P 2Z9 CANADA, hereby declare that I was personally present and did see Steven Richard WRANOVSKY who is personally known to me to be the person named in the above assignment duly sign and execute the same.

DECLARED at Toronto, Ontario, CANADA, this 23 day of October, 2015.

Maia Jones

PATENT

REEL: 045015 FRAME: 0986

RECORDED: 02/23/2018