

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT4885011

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
Jim Potenziano	07/21/2014
Joe Stauffer	07/21/2014
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	INO THERAPEUTICS LLC
<b>Street Address:</b>	PERRYVILLE III CORPORATE PARK, 53 FRONTAGE ROAD, THIRD FLOOR
<b>City:</b>	HAMPTON
<b>State/Country:</b>	NEW JERSEY
<b>Postal Code:</b>	08827-9001
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
Application Number:	15854643
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(877)769-7945
<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>	(617) 542-5070
<b>Email:</b>	apsi@fr.com
<b>Correspondent Name:</b>	JANIS K. FRASER
<b>Address Line 1:</b>	FISH & RICHARDSON P.C.
<b>Address Line 2:</b>	P.O.BOX 1022
<b>Address Line 4:</b>	MINNEAPOLIS, MINNESOTA 55440-1022
<b>ATTORNEY DOCKET NUMBER:</b>	26047-0004003
<b>NAME OF SUBMITTER:</b>	MARY FLORCZAK
<b>SIGNATURE:</b>	/Mary Florczak/
<b>DATE SIGNED:</b>	03/27/2018
<b>Total Attachments: 5</b>	
source=26047assignment#page1.tif	
source=26047assignment#page2.tif	
source=26047assignment#page3.tif	

source=26047assignment#page4.tif

source=26047assignment#page5.tif

### ASSIGNMENT

For valuable consideration, the receipt of which we acknowledge, and intending to be bound legally, we, JIM POTENZIANO and JOE STAUFFER, each individually assign to INO THERAPEUTICS LLC, a corporation formed under the laws of New Jersey and having a principal place of business at Perryville III Corporate Park, 53 Frontage Road, Third Floor, Hampton, NJ 08827-9001, and its successors, transferees, and assignees (collectively the "Assignee"), all of our individual and joint right, title, and interest throughout the world in the subject matter (the "Subject Matter") of the patent applications listed on the attached Exhibit A (collectively known as the "Applications"). We authorize attorneys for the Assignee to add to Exhibit A the application number, once it becomes available, for the Canadian application listed on Exhibit A.


This Assignment assigns (a) the Applications and all other applications that may be made for, and all patents, utility models, design registrations, and other rights of exclusion and inventors' certificates for, any of the Subject Matter (collectively the "Applications and Granted Rights") in every country or region, (b) the right to claim priority based on and the benefit of the filing date of any of the Applications and Granted Rights under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other applicable treaties or conventions, and (c) the right to pursue, collect, and retain in the Assignee's name or otherwise, damages and any other remedies arising from any past, present, or future infringement of the Subject Matter, the Applications and Granted Rights, and any other rights assigned by this Assignment.

We authorize the Assignee to apply for and pursue protection for any or all of the Subject Matter, the Applications and Granted Rights, and any other rights assigned by this Assignment in all countries, regions, and territories of the world, in our names or in the Assignee's name.

We represent and warrant that we have the right and power to make this Assignment and that we have not made and will not make any other assignment that conflicts with this Assignment.

We will communicate to the Assignee (or at the request of the Assignee to other parties) all known facts in any form relating to the Subject Matter, will execute and provide all oaths and declarations, statements, testimony, assignments, powers of attorney, applications, and

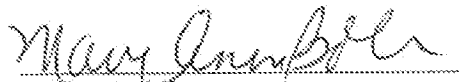
documents, and will perform all other lawful acts necessary or desirable to secure fully to the Assignee the rights, titles, and interests assigned by this Assignment.

 DATE: 7/21/2014  
Jim Potenziano

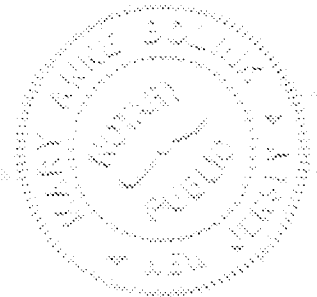
STATE OF New Jersey )  
COUNTY OF Hunterdon ) SS.

On July 21, 2014, before me, the undersigned, a notary public for the State of New Jersey, there personally appeared JIM POTENZIANO, 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

MARY ANNE BOLINK  
NOTARY PUBLIC OF NEW JERSEY  
ID # 2440391  
My Commission Expires 11/12/2018



Joe Stauffer DATE: 7/21/14  
Joe Stauffer

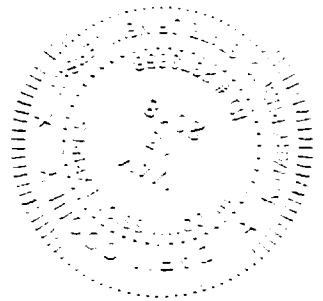
STATE OF NEW JERSEY )  
COUNTY OF HUNTERDON ) SS.

On 7/21/2014, before me, the undersigned, a notary public for the State of NEW JERSEY, there personally appeared JOE STAUFFER, 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.

Daria Cooney  
Notary Public

**DARIA COONEY  
NOTARY PUBLIC  
NEW JERSEY  
MY COMMISSION EXPIRES 5-15-2018**



The Assignee hereby acknowledges and accepts the foregoing assignment.

Assignee: INO THERAPEUTICS LLC

Signature: William B Scheinker

Date: 7/21/2014

Name: William B Scheinker

Title: Assistant Secretary

STATE OF New Jersey )  
 ) SS.

COUNTY OF Hunterdon )

On July 21, 2014, before me, the undersigned, a notary public for the State of New Jersey, there personally appeared William B Scheinker, 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.

Mary Anne Schuler  
Notary Public

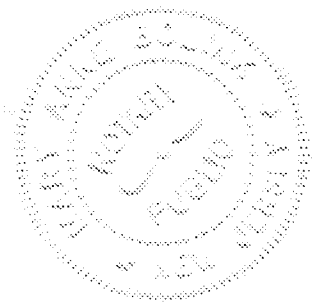


EXHIBIT A

COUNTRY	SERIAL NUMBER	FILING DATE	TITLE
Australia	2014203438	June 24, 2014	METHODS OF REDUCING THE RISK OF MORTALITY ASSOCIATED WITH A MEDICAL TREATMENT
Canada		June 25, 2014	METHODS OF REDUCING THE RISK OF MORTALITY ASSOCIATED WITH A MEDICAL TREATMENT
Mexico	Mx/a/2014/007847	June 25, 2014	METHODS OF REDUCING THE RISK OF MORTALITY ASSOCIATED WITH A MEDICAL TREATMENT
United States	14/313,767	June 24, 2014	METHODS OF REDUCING THE RISK OF MORTALITY ASSOCIATED WITH A MEDICAL TREATMENT
United States	14/325,993	July 8, 2014	METHODS OF REDUCING THE RISK OF MORTALITY ASSOCIATED WITH A MEDICAL TREATMENT
WIPO	PCT /US2014/043908	June 24, 2014	METHODS OF REDUCING THE RISK OF MORTALITY ASSOCIATED WITH A MEDICAL TREATMENT

23242524.doc