

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5029164

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	ASSIGNMENT	
CONVEYING PARTY DATA		
	Name	Execution Date
	SHAWN FLYNN	06/10/2018
RECEIVING PARTY DATA		
Name:	RESTORE MEDICAL SOLUTIONS, INC.	
Street Address:	20 DUDLEY STREET, SUITE 300	
City:	MEMPHIS	
State/Country:	TENNESSEE	
Postal Code:	38103	
PROPERTY NUMBERS Total: 2		
Property Type	Number	
Application Number:	62296649	
Application Number:	15436181	
CORRESPONDENCE DATA		
Fax Number:		
<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>		
Phone:	901-524-5317	
Email:	shawn.sentilles@arlaw.com	
Correspondent Name:	SHAWN D. SENTILLES	
Address Line 1:	6075 POPLAR AVENUE, SUITE 700	
Address Line 4:	MEMPHIS, TENNESSEE 38119	
ATTORNEY DOCKET NUMBER:	25467-2	
NAME OF SUBMITTER:	SHAWN D. SENTILLES	
SIGNATURE:	/Shawn D. Sentilles/	
DATE SIGNED:	06/28/2018	
Total Attachments: 3		
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source=ShawnFlynnAssignment#page3.tif		

ASSIGNMENT

For valuable consideration, the receipt of which is hereby acknowledged, Assignor, **Shawn Flynn**, an individual residing at 2115 A Oberlin Street, Palo Alto, California 94305 USA, does hereby sell, assign, and otherwise transfer forever, to Assignee, **Restore Medical Solutions, Inc.**, a Tennessee corporation having its principal place of business at 20 Dudley Street, Suite 300, Memphis, Tennessee, 38103, the entire right, title and interest for the United States and its territorial possessions and in all foreign countries, including all rights to claim priority, in and to any and all improvements which are disclosed in the attached **Schedule A**, and any continuations, continuations-in-part, divisionals, conversions, renewals, foreign counterparts, or substitutes of the above identified patent application(s), and any Letters Patent, any reissue patents or reexamination patents, or any foreign patent equivalents thereof. Assignor covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment. Assignor grants to Assignee and its authorized representatives the power to insert in this Assignment any further identification that may be necessary or desirable to comply with requirements for recordation of this Assignment. Assignor further agrees to: (a) cooperate with Assignee in the prosecution of the Application and foreign counterparts; (b) execute, verify, acknowledge and deliver all such further papers, including patent applications and instruments of transfer; and (c) perform such other acts as Assignee lawfully may request to obtain or maintain the Patent for the invention in any and all countries.

ASSIGNOR:

6/10/18
Date



State of _____)
County of _____)

I, _____, a Notary Public for said County and State, do hereby certify that
_____ personally appeared before me this day and acknowledged
the due execution of the foregoing instrument.

Witness my hand and official seal, this the _____ day of _____, 20__.

(Official Seal)

Notary Public

My commission expires _____

**SEE ATTACHED
NOTARY CERTIFICATE**

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Santa Clara)

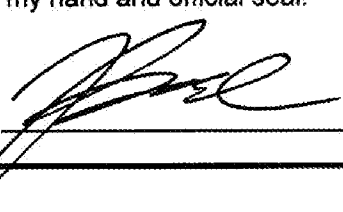
On June 10, 2018 before me, Justin Be, Notary Public
(insert name and title of the officer)

personally appeared Shawn Michael Flynn
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.

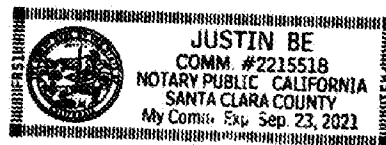
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature



(Seal)



SCHEDULE A

Assignment of Patents

Patent Applications					
Description/Title	Serial No.	Filing Date	Patent No.	Issue Date	Status
Point of Use Cleaning System for Endoscopes	US82/296649	2016-02-18	N.A.	N.A.	Expired; converted to utility prior to expiration
Point of Use Cleaning System for Endoscopes	US15/436181	2017-02-17	Pending	N.A.	Pending