

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5132822

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
JEFFREY RALPH SWIFT	09/10/2018
RECEIVING PARTY DATA	
Name:	OBP MEDICAL CORPORATION
Street Address:	360 MERRIMACK STREET
City:	LAWRENCE,
State/Country:	MASSACHUSETTS
Postal Code:	01843
PROPERTY NUMBERS Total: 4	
Property Type	Number
Application Number:	15178675
Application Number:	15178712
Application Number:	15178744
PCT Number:	US1636833
CORRESPONDENCE DATA	
Fax Number:	(212)575-0671
<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:	212-790-9200
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Correspondent Name:	COWAN, LIEBOWITZ & LATMAN, P.C.
Address Line 1:	114 WEST 47TH STREET
Address Line 2:	ANASTASIA ZHADINA / RUTH MONTALVO
Address Line 4:	NEW YORK, NEW YORK 10036-1525
ATTORNEY DOCKET NUMBER:	30467.009 PAT1-3 AND PCT
NAME OF SUBMITTER:	ANASTASIA ZHADINA
SIGNATURE:	/Anastasia Zhadina/
DATE SIGNED:	09/10/2018
Total Attachments: 5	
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CORRECTIVE ASSIGNMENT

WHEREAS, I, the below-named ASSIGNOR, am the inventor of the invention(s) described in one or more of the following patent application(s):

ATTORNEY DOCKET NUMBER	FILING DATE	APPLICATION NO.	TITLE
30467.009-US1	6-10-2016	15/178,673	ILLUMINATED SURGICAL RETRACTOR
30467.009-US2	6-10-2016	15/178,712	ILLUMINATED SURGICAL RETRACTOR
30467.009-US3	6-10-2016	15/178,744	ILLUMINATED SURGICAL RETRACTOR
30467.009-PCT	6-10-2016	PCT/US16/36833	ILLUMINATED SURGICAL RETRACTOR

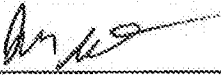

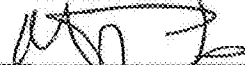
WHEREAS on June 9, 2016, I executed an Assignment (hereinafter "June 9, 2016 Assignment") of my entire right, title and interest in and to the invention(s) and the above-listed patent application(s), and all nonprovisional, foreign, and PCT applications claiming priority thereto, and divisions and continuations thereof, and all Letters Patent of the United States which may be granted thereon, and all reissues thereof, and all rights to claim priority on the basis of the above-listed application(s), and all Letters Patent which may be granted on the invention(s) and/or on applications claiming priority to the above-listed application(s), in any foreign country, and all extensions, renewals, and reissues thereof, to OBP Medical, as Assignee;

And WHEREAS, the June 9, 2016 Assignment incorrectly indicates OBP Medical as the Assignee, instead of the correct Assignee name OBP Medical Corporation;

NOW, THEREFORE, be it known that OBP Medical Corporation, a corporation having its principal place of business at 360 Merrimack Street, Building 9, Lawrence, MA 01843 ("ASSIGNEE"), is the correct name of the ASSIGNEE, to which ASSIGNOR has sold, assigned, transferred, and set over by the June 9, 2016 Assignment, the entire right, title, and interest in and to the invention(s) and the above-listed patent application(s), and all nonprovisional, foreign, and PCT applications claiming priority thereto, and divisions and continuations thereof, and all Letters Patent of the United States which may be granted thereon, and all reissues thereof, and all rights to claim priority on the basis of the above-listed application(s), and all Letters Patent which may be granted on the invention(s) and/or on applications claiming priority to the above-listed application(s), in any foreign country, and all extensions, renewals, and reissues thereof.

A copy of the June 9, 2016 Assignment with corrections made therein, which are initialed and dated by ASSIGNOR, is attached hereto as Appendix A.

IN TESTIMONY WHEREOF, I hereunto set my hand the day and year corresponding to my signature:

1	ASSIGNOR	FAMILY NAME OR SURNAME	GIVEN NAME	MIDDLE NAME	
		SWIFT	Jeffrey	Ralph	
	MAILING ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE
		360 Merrimack Street Building 9	Lawrence	MA	01843
	SIGNATURE OF ASSIGNOR				DATE
					9/10/2018
WITNESS #1	NAME	SIGNATURE	DATE		
	Kendra LaPlante		9/10/18		
WITNESS #2	NAME	SIGNATURE	DATE		
	Matthew Trask		9/10/18		

30467.009

Appendix A

ASSIGNMENT

WHEREAS, I, the below-named ASSIGNOR, am the inventor of the invention(s) described in one or more of the following patent application(s):¹

ATTORNEY DOCKET NUMBER	FILING DATE	APPLICATION NO.	TITLE
30467.009-US1	6-10-2016	15/178,675	ILLUMINATED SURGICAL RETRACTOR
30467.009-US2	6-10-2016	15/178,712	ILLUMINATED SURGICAL RETRACTOR
30467.009-US3	6-10-2016	15/178,744	ILLUMINATED SURGICAL RETRACTOR
30467.009-PCT	6-10-2016	PCT/US16/36833	ILLUMINATED SURGICAL RETRACTOR

OBP Medical Corporation

And WHEREAS OBP Medical, a corporation having its principal place of business at 360 Merrimack Street, Building 9, Lawrence, MA 01843, ("ASSIGNEE"), desires to acquire the entire right, title, and interest in and to the invention(s) and the above-listed application(s), and in and to all applications for patent to be filed and all patents to be issued for the invention(s) and/or claiming priority to any of the above-listed application(s), throughout the world;

NOW, THEREFORE, be it known that, for \$1.00 and other good and valuable consideration the receipt of which from ASSIGNEE is hereby acknowledged, ASSIGNOR has sold, assigned, transferred, and set over, and does hereby sell, assign, transfer, and set over unto ASSIGNEE, its lawful successors and assigns, the entire right, title, and interest in and to the invention(s) and the above-listed patent application(s), and all nonprovisional, foreign, and PCT applications claiming priority thereto, and divisions and continuations thereof, and all Letters Patent of the United States which may be granted thereon, and all reissues thereof, and all rights to claim priority on the basis of the above-listed application(s), and all Letters Patent which may be granted on the invention(s) and/or on applications claiming priority to the above-listed application(s), in any foreign country, and all extensions, renewals, and reissues thereof;

AND, ASSIGNOR hereby authorizes and requests the Commissioner for Patents and Trademarks of the United States, and any official of any foreign country whose duty it is to issue patents, to issue all Letters Patent for the invention(s) and/or the above-listed application(s) and related foreign applications to ASSIGNEE, its successors and assigns, in accordance with the terms of this ASSIGNMENT;

AND, ASSIGNOR further covenants and agrees that ASSIGNOR will, without further consideration, communicate with ASSIGNEE, its successors and assigns, any facts known to ASSIGNOR respecting the invention(s) and/or the above-listed applications, and testify in any legal proceeding, sign all lawful papers when called upon to do so, execute and deliver any and all papers that may be necessary or desirable to perfect title to the invention(s) and/or the above-listed application(s) in said ASSIGNEE, its successors or assigns, execute all

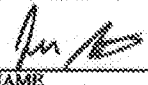
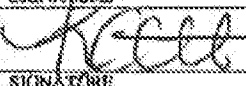

9/10/2018

¹ I hereby authorize and request my attorney, Steven Underwood, of Cowan, Liebowitz & Latman, to insert the filing date and application number of each listed application when known.

divisional, continuation, and reissue applications, make all rightful oaths and generally do everything possible to aid ASSIGNEE, its successors and assigns, to obtain and enforce proper patent protection for the invention(s) and/or the above-listed application(s) in the United States and any foreign country, it being understood that any expense incident to the execution of such papers shall be borne by ASSIGNEE, its successors and assigns.

AND, ASSIGNOR further covenants and agrees that ASSIGNOR will assign, and hereby does assign, to ASSIGNEE, its lawful successors and assigns, ASSIGNOR's entire right, title, and interest in and to any and all patent applications and patents, both United States and foreign, that claim priority to the above-listed application(s) (including continuations-in part).

IN TESTIMONY WHEREOF, I hereunto set my hand the day and year corresponding to my signature:

I	ASSIGNOR	FAMILY NAME OR SURNAME		GIVEN NAME		MIDDLE NAME		
		SWIFT		Jeffrey		Ralph		
	MAILING ADDRESS	STREET		CITY		STATE OR COUNTRY	ZIP CODE	
		P.O. Box 932		Boca Grande		FL	33921	
	SIGNATURE OF ASSIGNOR						DATE	
							6/9/16	
WITNESS #1	NAME		SIGNATURE		DATE			
	Kelly Gtavano				6/9/16			
WITNESS #2	NAME		SIGNATURE		DATE			
	Lolita Nisco				6/9/16			