## 505128755 10/05/2018

PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:		NEW ASSIGNMENT		
NATURE OF CONVEYANCE:		ASSIGNMENT	ASSIGNMENT	
CONVEYING PARTY	DATA			
		Name	Execution Date	
BERNARD J. ESAREY			09/24/2018	
JEFFREY A. WHITED	I		10/02/2018	
RECEIVING PARTY I	ΔΤΑ			
Name:	EXSUR	CO MEDICAL, INC.		
Street Address:	6801 ST	TATE ROUTE 60		
City:	WAKEM	/AN		
State/Country:	OHIO			
Postal Code:	44889			
Application Number:		16056083		
CORRESPONDENCE				
Fax Number:		(216)621-4072		
	be sent to	the supplied address first if the tis suppl		
using a fax number,		the e-mail address first; if that is unsu ; if that is unsuccessful, it will be sent		
Phone:	jf provided 2	<b>; if that is unsuccessful, it will be sent</b> 216-621-2234		
Phone: Email:	if provided, 2 0	<b>I; if that is unsuccessful, it will be sent</b> 216-621-2234 cplacko@tarolli.com	via US Mail.	
Phone: Email: Correspondent Name	if provided, 2 c e:	<b>I; if that is unsuccessful, it will be sent</b> 216-621-2234 cplacko@tarolli.com TAROLLI, SUNDHEIM, COVELL & TUMI	via US Mail.	
Phone: Email:	if provided 2 c e: 1	<b>I; if that is unsuccessful, it will be sent</b> 216-621-2234 cplacko@tarolli.com	via US Mail.	
Phone: Email: Correspondent Name Address Line 1:	if provided, 2 c e: 7 1 S	<b>I; if that is unsuccessful, it will be sent</b> 216-621-2234 cplacko@tarolli.com TAROLLI, SUNDHEIM, COVELL & TUMI 1300 EAST NINTH STREET	via US Mail.	
Phone: Email: Correspondent Name Address Line 1: Address Line 2: Address Line 4:	if provided 2 e: 1 S	<i>t; if that is unsuccessful, it will be sent</i> 216-621-2234 cplacko@tarolli.com TAROLLI, SUNDHEIM, COVELL & TUMI 1300 EAST NINTH STREET SUITE 1700	via US Mail.	
Phone: Email: Correspondent Name Address Line 1: Address Line 2: Address Line 4:	if provided	<i>t; if that is unsuccessful, it will be sent</i> 216-621-2234 cplacko@tarolli.com TAROLLI, SUNDHEIM, COVELL & TUMI 1300 EAST NINTH STREET SUITE 1700 CLEVELAND, OHIO 44114	via US Mail.	
Phone: Email: Correspondent Name Address Line 1: Address Line 2:	if provided	<i>I; if that is unsuccessful, it will be sent</i> 216-621-2234 cplacko@tarolli.com TAROLLI, SUNDHEIM, COVELL & TUMI 1300 EAST NINTH STREET SUITE 1700 CLEVELAND, OHIO 44114 BET-021417 US CON 2-1	via US Mail.	
Phone: Email: Correspondent Name Address Line 1: Address Line 2: Address Line 4: ATTORNEY DOCKET NAME OF SUBMITTER	if provided	<i>; if that is unsuccessful, it will be sent</i> 216-621-2234 cplacko@tarolli.com TAROLLI, SUNDHEIM, COVELL & TUMI 1300 EAST NINTH STREET SUITE 1700 CLEVELAND, OHIO 44114 BET-021417 US CON 2-1 GEORGE L. PINCHAK	via US Mail.	
Phone: Email: Correspondent Name Address Line 1: Address Line 2: Address Line 4: ATTORNEY DOCKET NAME OF SUBMITTER SIGNATURE: DATE SIGNED: Total Attachments: 2	if provided, 2 e: 1 S NUMBER: R:	<i>I; if that is unsuccessful, it will be sent</i> 216-621-2234 cplacko@tarolli.com TAROLLI, SUNDHEIM, COVELL & TUMI 1300 EAST NINTH STREET SUITE 1700 CLEVELAND, OHIO 44114 BET-021417 US CON 2-1 GEORGE L. PINCHAK /George L. Pinchak/	via US Mail.	
Phone: Email: Correspondent Name Address Line 1: Address Line 2: Address Line 4: ATTORNEY DOCKET NAME OF SUBMITTER SIGNATURE: DATE SIGNED:	if provided, 2 c e: 1 5 c NUMBER: R: NUMBER:	<i>I; if that is unsuccessful, it will be sent</i> 216-621-2234 cplacko@tarolli.com TAROLLI, SUNDHEIM, COVELL & TUMI 1300 EAST NINTH STREET SUITE 1700 CLEVELAND, OHIO 44114 BET-021417 US CON 2-1 GEORGE L. PINCHAK /George L. Pinchak/	via US Mail.	

IN CONSIDERATION of One Dollar and other good and valuable consideration, receipt of which is hereby acknowledged, we, Bernard J. Esarey and Jeffrey A. Whited, both citizens of the United States of America, respectively, and residing at 82647 West Skyline Drive, Lorain, OH 44053, U.S.A. and 4423 Kings Forest Blvd., Richfield, OH 44286, U.S.A., respectively, do hereby sell, transfer, set over, and assign unto EXSURCO MEDICAL, INC., an Ohio corporation, having a place of business at 6801 State Route 60, Wakeman, OH 44889, its successors, assigns, nominees, or other legal representatives, the entire right, title, and interest in and to the invention entitled POWER OPERATED DERMATOME WITH SHIELDED ROTARY KNIFE BLADE. invented by us, and the application for United States patent therefor, U.S. Non-Provisional Patent Application Serial No. 16/056,083, filed August 6, 2018, ("said U.S. Non-Provisional Patent Application") and all original and reissued patents granted therefor, and further including the entire right, title and interest in and to any and all U.S. and/or foreign patent applications ("said U.S. and/or foreign patent applications"), including any and all U.S. patent applications, foreign patent applications, and international PCT (Patent Cooperation Treaty) patent applications claiming priority from said U.S. Non-Provisional Patent Application and/or said U.S. and/or foreign patent applications, and further including any and all continuation, divisional, continuation-in-part, design patent applications, foreign industrial design registrations, and/or reissue patent applications thereof, including the subject-matter of any and all claims which may be obtained in any U.S. and/or foreign patent or patents issuing from said U.S. Non-Provisional Patent Application and/or said U.S. and/or foreign patent applications, and all original and reissued patents which may be granted thereon in the U.S. or any foreign countries, and hereby authorize and request the Commissioner of Patents of the United States, and any official of any country or countries foreign to the United States whose duty it is to issue patents on applications as aforesaid, to issue any patent or Letters Patent to the said EXSURCO MEDICAL, INC., its successors, assigns, nominees, or other legal representatives, as assignee and owner of the entire interest in the patent or Letters Patent, and covenant that we have full right to convey said entire interest herein assigned and that we have not executed and will not execute any agreement in conflict herewith, and agree that we will communicate to said EXSURCO MEDICAL, INC., its successors, assigns, nominees or other legal representatives, all facts known to us respecting said invention, whenever requested, and testify in any legal proceedings, sign all lawful papers, execute and deliver all non-provisional, foreign, international PCT, divisional, continuation, continuation-in-part, design, and/or reissue applications, make all rightful oaths and do all lawful acts requisite for the application for such non-provisional, foreign, international PCT, divisional, continuation, continuation-in-part, design, or reissue applications, or the procuring thereof, and that if and when said EXSURCO MEDICAL, INC., its successors, assigns, nominees or other legal representatives desire to file a disclaimer relating thereto, we will, upon request, sign and deliver all lawful papers requisite for the filing of such disclaimer, and we further covenant and agree that we will, at any time upon request do everything legally possible to aid said EXSURCO MEDICAL, INC., its successors, assigns, nominees or other legal representatives, either in its or our own name, to apply for, obtain and enforce proper

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patent protection in all countries, including priority rights granted to patents in foreign countries according to all the laws and treaties in force, all without further consideration but at the expense of said **EXSURCO MEDICAL**, **INC**, its successors, assigns, nominees or other legal representatives.

Date: <u>1 - 24 - 2018</u>

State:	Ohio	)
County:	Erie	)

BERNARD J. ESAREY

This <u>If</u> day of <u>departments</u> 2018, before me personally came the above named **BERNARD J**. **ESAREY** to me personally known as the individual who executed the foregoing Assignment, and who acknowledged to me that he executed the same of his own free will for the purpose therein set forth.



SHERYL L OGLESBEE Shery L. Oglosber Notary Public, State of Ohio My Commission Expires 5/19/21 Notary

JEFFREY A. WHITED

Date: 10/2/18

State:	Ohio	ALC: NO
	lan e	>
County:	Enié	۱ ۱

This <u>A</u>day of <u>Data</u> 2018, before me personally came the above named **JEFFREY A**. **WHITED** to me personally known as the individual who executed the foregoing Assignment, and who acknowledged to me that he executed the same of his own free will for the purpose therein set forth.



SHERYL L. OGLESBEE Notary Public, State of Ohio My Commission Expires 5/19/2/

Shurf L. Oglisber

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## **RECORDED: 10/05/2018**