### 505497173 05/29/2019

# PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT

#### **CONVEYING PARTY DATA**

Name	Execution Date
ANTHONY RANDAL MCINTOSH	02/03/2015

#### **RECEIVING PARTY DATA**

Name:	BAYCREST CENTRE FOR GERIATRIC CARE
Street Address:	3560 BATHURST STREET
City:	TORONTO, ONTARIO
State/Country:	CANADA
Postal Code:	M6A 2E1

#### **PROPERTY NUMBERS Total: 1**

Property Type	Number
Application Number:	16278370

#### **CORRESPONDENCE DATA**

Fax Number:

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.

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Correspondent Name: SCHWEGMAN LUNDBERG & WOESSNER, P.A.

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ATTORNEY DOCKET NUMBER:	3037.126US2
NAME OF SUBMITTER:	KASIE A. BOSMA
SIGNATURE:	/Kasie A. Bosma/
DATE SIGNED:	05/29/2019

#### **Total Attachments: 5**

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PATENT 505497173 REEL: 049301 FRAME: 0915

# RECORDATION FORM COVER SHEET PATENTS ONLY

Atty Ref/Docket No.: 3037.126US2 Patent and Trademark Office To the Director of the U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof. 2. Name and address of receiving party(ies): 1. Name of conveying party(ies): Name: Baycrest Centre for Geriatric Care Anthony Randal McIntosh Street Address: 3560 Bathurst Street Additional name(s) of conveying party(ies) attached? City: Toronto, Ontario, M6A 2E1 Country: Canada [ ]Yes [X]No 3. Nature of conveyance: Additional name(s) & address(es) attached? [ ]Yes [X]No [X] Assignment [ ] Merger [ ] Security Agreement [ ] Change of Name [ ] Other Execution Date: February 3, 2015 4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: A. Patent Application No.(s) B. Patent No.(s) Serial No. 16/278,370 Additional numbers attached? [ ]Yes [X]No 6. Total number of applications and patents involved: 1 5. Name and address of party to whom correspondence concerning document should be mailed: 7. Total fee (37 CFR 3.41):\$ 0.00 Name: Suneel Arora [[Enclosed []Authorized to be charged to deposit account 19-Address: 0743 Schwegman Lundberg & Woessner, P.A. P.O. Box 2938 Please charge any additional fees or credit any over Minneapolis, Minnesota 55402 payments to our Deposit Account No.: 19-0743 DO NOT USE THIS SPACE 9. Statement and signature. To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. 15 May 2019 Suneel Arora/Reg. No. 42,267 Name of Person Signing Signature Date Total number of pages including cover sheet: 5 Mail documents to be recorded with required cover sheet information to: Commissioner of Patents and Trademarks Mail Stop Assignment Recordation Services

P.O. Box 1450

Alexandria, VA 22313-1450

## **WORLDWIDE ASSIGNMENT**

I, Anthony Randal McIntosh, whose full post office address is 31 Lauder Avenue, Toronto, Ontario, M6H 3E2, have invented Method and computing system for modelling a primate brain, for which the U.S. provisional patent application was filed:

Filing Date: August 2, 2012 Serial No. 61/678,950

and for which the International PCT patent application was filed:

Filing Date: August 2, 2013 Serial No. PCT/IB2013/001707

in consideration of Two Dollars (\$2,00) paid to us, the receipt and sufficiency of which is hereby acknowledged, and other good and valuable consideration. I by these presents confirm that I have sold, transferred and assigned and do hereby sell, transfer and assign to BAYCREST CENTRE FOR GERIATRIC CARE, ("Assignee"), having an office at 3560 Bathurst St., Toronto, Ontario, Canada M6A 2E1, and its successors and assigns or nominees, all MY rights, title and interest in the United States and all and all other countries of the world in and to MY invention as fully described and claimed in the United States and International PCT patent applications, and I sell, assign and transfer to BAYCREST CENTRE FOR GERIATRIC CARE, all MY rights to apply for patent on said invention in the United States and all other 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, international PCT patent applications and all national phase applications and all MY corresponding rights, title and interest in and to any patent which may issue therefor in the United States and all other countries of the world, to have and to hold for BAYCREST CENTRE FOR GERIATRIC CARE'S own use and BAYCREST CENTRE FOR GERIATRIC CARE'S successors and assigns as fully and entirely as the same might be enjoyed by Anthony Randal McIntosh if this sale had not been made.

AND I UNDERTAKE to sign such further documents to effect the aforesaid sale, assignment and transfer as may be required from time to time, without reimbursement, but at the expense of BAYCREST CENTRE FOR GERIATRIC CARE,

AND I authorize Pfenning, Meinig & Partner GbR to enter the particulars of the signature and particulars of the Declaration of Witness when missing.

This assignment can be signed in counterparts.

The agreement shall be retroactive *nunc pro tunc* to the filing date of the PCT application such that the effective date of this agreement is **August 2, 2013**.

Signed at (city/town) <u>((////</u>
This <u>3</u> day of <u>Fx\/\(\(\(\(\(\)\)\)</u> , 2015.
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ANTHONY RANDAL MCINTOSH
DECLARATION OF WITNESS
I, <u>Jean Lazayus</u> , whose full post office address is <u> るちゅっ Bahwak Gfyeak, Talbako, ONTARIO M&amp;A QE7</u> , hereby declare that that I was personally present and did see <b>Anthony Randal McIntosh</b> who is personally known to me to be the person named in the above assignment duly sign
and execute the same.
DECLARED at (city/town)
This 3_day of February, 2015.  (Signature of Witness)

## ACCEPTANCE

The Assignees accept this assignment.
Signed at (city/town) Toronto, Ontario
This 3 day of February 2015.
BAYCREST CENTRE FOR SERIATRIC CARE
Signature:
Name: Ron Riesenbach
Position: VP, Innovation & Chief Technology Officer
DECLARATION OF WITNESS
1. <u>Daniela Cavacece - Te+i</u> , whose full post office address is 3560 BaYhorst Street, hereby declare that I was
personally present and did see, Ron Riesenbach, who is
personally known to me to be the person that has duly signed and executed the above assignment on behalf of <b>BAYCREST CENTRE FOR GERIATRIC CARE</b> .
DECLARED at (city/town) Toronto, Ontario
This 3 day of February , 2015.
Danyla Paraceu- Jet.
(Signature of Witness)

PATENT REEL: 049301 FRAME: 0920

**RECORDED: 05/29/2019**