

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT5546631

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
DANIEL J. MYERS	04/01/2016
JAMES CASSELLA	04/07/2016
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	ALEXZA PHARMACEUTICALS, INC.
<b>Street Address:</b>	2091 STIERLIN CT.
<b>City:</b>	MOUNTAIN VIEW
<b>State/Country:</b>	CALIFORNIA
<b>Postal Code:</b>	94043
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
<b>Application Number:</b>	16235675
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(303)268-0065
<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>	303-268-0066
<b>Email:</b>	sharward@adseroip.com
<b>Correspondent Name:</b>	ADSERO IP
<b>Address Line 1:</b>	8210 SOUTHPARK TERRACE
<b>Address Line 4:</b>	LITTLETON, COLORADO 80120
<b>ATTORNEY DOCKET NUMBER:</b>	0208.00098.17DIV
<b>NAME OF SUBMITTER:</b>	KATHERINE LOBEL-RICE, REG. NO. 58,079
<b>SIGNATURE:</b>	/Katherine Lobel-Rice/
<b>DATE SIGNED:</b>	05/30/2019
<b>Total Attachments: 5</b>	
source=Executed_Assignment_0208_00098_17DIV#page1.tif	
source=Executed_Assignment_0208_00098_17DIV#page2.tif	
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ASSIGNMENT

WHEREAS, the undersigned inventor(s) (referred to, collectively, if more than one, as "Assignor") have made an invention entitled Nicotine Salt with Meta-Salicylic Acid for which an application for United States Letters Patent was filed on January 11, 2016 as Application Serial No. 14/904,359, which is the U.S. national stage application corresponding to PCT Patent Application No. PCT/US2014/046288, filed July 11, 2014 and

WHEREAS, Alexza Pharmaceuticals, Inc. ("Assignee") having a place of business at 2091 Stierlin Ct., Mountain View, CA 94043 desires to acquire all right, title and interest in and to the above identified invention and application;

NOW, THEREFORE, Assignor, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, does hereby sell, assign, convey and transfer unto Assignee all right, title and interest in and to the above identified invention and application, together with all corresponding international and foreign applications and patents which may be filed thereon, including the right to claim priority from the above identified United States application; and Assignor hereby agrees that Assignor will sign all lawful papers, including, without limitation, all divisional, continuation, renewal, extension and reissue applications, and make all rightful oaths in execution thereof, and will generally do everything possible to aid Assignee, its successors, assigns and nominees to obtain and enforce proper protection for the invention in all countries, this obligation to be binding upon Assignor (each and severally, if more than one) and upon Assignor's personal representative or other legal successor.

IN TESTIMONY WHEREOF, the undersigned Assignor (and each of them, if more than one) has signed below.

Date: 01 APRIL 2016



Address:

Daniel J. Myers  
75 Eldora Drive  
Mountain View, CA 94041

STATE OF \_\_\_\_\_ )

COUNTY OF \_\_\_\_\_ )

ss.

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by Daniel J. Myers.

Witness my hand and official seal.

My commission expires: \_\_\_\_\_

SEE ATTACHED CERTIFICATE

Notary Public

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

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 )

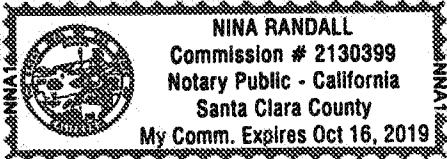
On APRIL 15, 2016 before me, NINA RANDALL, NOTARY PUBLIC  
Date Here Insert Name and Title of the Officer

personally appeared DANIEL J. MYERS  
Name(s) of Signer(s)

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 Nina Randall  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: ASSIGNMENT Document Date: \_\_\_\_\_  
Number of Pages: 1 Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_  
 Corporate Officer — Title(s): \_\_\_\_\_  
 Partner —  Limited  General  
 Individual  Attorney in Fact  
 Trustee  Guardian or Conservator  
 Other: \_\_\_\_\_  
Signer is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_  
 Corporate Officer — Title(s): \_\_\_\_\_  
 Partner —  Limited  General  
 Individual  Attorney in Fact  
 Trustee  Guardian or Conservator  
 Other: \_\_\_\_\_  
Signer is Representing: \_\_\_\_\_

Date: \_\_\_\_\_

Address:

\_\_\_\_\_  
James Cassella  
7 Little Point Street  
Essex, CT 06426

STATE OF \_\_\_\_\_ )  
  ) ss.  
COUNTY OF \_\_\_\_\_ )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by James Cassella.

Witness my hand and official seal.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

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**ASSIGNMENT**

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 Daniel J. Myers  
 75 Eldora Drive  
 Mountain View, CA 94041

Address:

STATE OF \_\_\_\_\_ )  
 ) ss.  
 COUNTY OF \_\_\_\_\_ )

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Witness my hand and official seal.

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
 Notary Public

