

PATENT ASSIGNMENT COVER SHEET

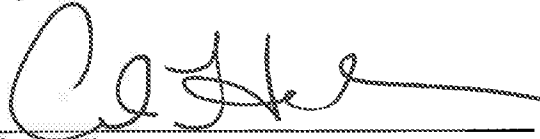
Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT5583186

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
CARL HEILMAN	05/23/2014
DR ADEL M. MALEK	05/23/2014
RECEIVING PARTY DATA	
Name:	TUFTS MEDICAL CENTER, INC.
Street Address:	800 WASHINGTON STREET
City:	BOSTON
State/Country:	MASSACHUSETTS
Postal Code:	02111
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	16444982
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:	6175002500
Email:	info@ORpatent.com
Correspondent Name:	O&R PATENT LAW
Address Line 1:	500 CONGRESS STREET
Address Line 4:	BOSTON, MASSACHUSETTS 02109
ATTORNEY DOCKET NUMBER:	70010-040004
NAME OF SUBMITTER:	ERIN KELLY
SIGNATURE:	/Erin Kelly/
DATE SIGNED:	06/20/2019
Total Attachments: 2	
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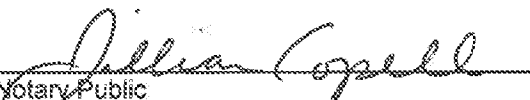
ASSIGNMENT

For valuable consideration, we, Carl Heilman of 16 Webster Lane, Wayland, MA 01778, Dr. Adel M. Malek of 47 Radcliffe Road, Weston, Massachusetts 02493, hereby assign to Tufts Medical Center, Inc., a corporation, having a place of business at 800 Washington Street, Boston, MA 02111, and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are subject of an application for United States Patent signed by us, entitled **ENDOVASCULAR CEREBROSPINAL FLUID SHUNT**, filed 4/23/2014, and assigned U.S. Serial Number 14/259,614, and we authorize and request the attorneys appointed in said application to hereafter complete this assignment by inserting above the filing date and serial number of said application when known; this assignment including said application, any and all United States and foreign patents, utility models, and design registrations granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and we authorize the Assignee to apply in all countries in our name or in its own name for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and we agree for ourselves and our respective heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

Date: 5/23/14
Carl HeilmanSTATE OF MA)
COUNTY OF Suffolk) ss.

On May 23rd, before me, the undersigned, a notary public for the State of MA, there personally appeared Carl Heilman personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.


Notary Public

JILLIAN COPELL
Notary Public
Commonwealth of Massachusetts
My Commission Expires
June 30, 2017

PATENT**REEL: 049542 FRAME: 0245**

Date: 5/23/2014

Adel M. Malek
Dr. Adel M. Malek

STATE OF MA
COUNTY OF Suffolk) SS.

On May 23rd, before me, the undersigned, a notary public for the State of MA, there personally appeared Dr. Adel M. Malek personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this Assignment, who acknowledged having executed the same in his authorized capacity and that by his signature on this Assignment, the person or the entity upon behalf of which he acted, executed this Assignment.

WITNESS my hand and official seal.

Jillian Copell
Notary Public



JILLIAN COPELL
Notary Public
Commonwealth of Massachusetts
My Commission Expires
June 30, 2017