

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT5669228

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
ROBERT G. SVITEK	09/09/2016
JERRY STOKES	09/09/2016
PATRICK A. KELLY	09/21/2016
ANTHONY MCCOPPIN	09/09/2016
PATRICK A. MURAWSKI	09/09/2016
TRAVIS DESCHAMPS	09/09/2016
PATRICK E. LUTZ	06/22/2017
JOHN C. MAROUS, III	09/09/2016
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	CARDIACASSIST, INC.
<b>Street Address:</b>	620 ALPHA DRIVE
<b>City:</b>	PITTSBURGH
<b>State/Country:</b>	PENNSYLVANIA
<b>Postal Code:</b>	15238
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
Application Number:	16536069
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(412)471-4094
<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>	412-471-8815
<b>Email:</b>	assignments@webblaw.com
<b>Correspondent Name:</b>	THE WEBB LAW FIRM
<b>Address Line 1:</b>	ONE GATEWAY CENTER
<b>Address Line 2:</b>	420 FT. DUQUESNE BLVD, SUITE 1200
<b>Address Line 4:</b>	PITTSBURGH, PENNSYLVANIA 15222
<b>ATTORNEY DOCKET NUMBER:</b>	6333-1604124
<b>NAME OF SUBMITTER:</b>	CHRISTIAN E. SCHUSTER
<b>SIGNATURE:</b>	/Christian E. Schuster/

PATENT

<b>DATE SIGNED:</b>	08/14/2019
<p><b>Total Attachments: 17</b></p> <p>source=ASSIGNMENT#page1.tif source=ASSIGNMENT#page2.tif source=ASSIGNMENT#page3.tif source=ASSIGNMENT#page4.tif source=ASSIGNMENT#page5.tif source=ASSIGNMENT#page6.tif source=ASSIGNMENT#page7.tif source=ASSIGNMENT#page8.tif source=ASSIGNMENT#page9.tif source=ASSIGNMENT#page10.tif source=ASSIGNMENT#page11.tif source=ASSIGNMENT#page12.tif source=ASSIGNMENT#page13.tif source=ASSIGNMENT#page14.tif source=ASSIGNMENT#page15.tif source=ASSIGNMENT#page16.tif source=ASSIGNMENT#page17.tif</p>	

Application No. PCT/US2016/025264

DOMESTIC

Attorney Docket No. 6333-1511025

**ASSIGNMENT**

WHEREAS, as a below named inventor, I have invented certain new and useful improvements in

**CANNULA SYSTEM WITH STERILE CONNECTOR, BLOOD PUMP, AND PATIENT HARNESS**

(Invention Title)

for which a United States Provisional Patent application was filed on 03/31/2015 (mm/dd/yyyy) and bears Application Number 62/140,778 (hereinafter "said application").

AND/OR

for which I have this day executed an application for a United States Patent (hereinafter "said application").

AND/OR

for which an application for a United States Patent was filed on \_\_\_\_\_ (mm/dd/yyyy) and bears Application Number \_\_\_\_\_ (hereinafter "said application").

AND/OR

for which an international patent application was filed under the Patent Cooperation Treaty on 03/31/2016 (mm/dd/yyyy), bearing Application No. PCT/US2016/025264 (hereinafter "said application").

AND, WHEREAS, Cardiac Assist, Inc., a corporation of Delaware, having a place of business at 240 Alpha Drive, Pittsburgh, Pennsylvania, 15238, hereinafter called the "assignee", is desirous of acquiring the entire right, title, and interest in and to said application and the inventions and improvements therein disclosed.

NOW, THEREFORE, for good and valuable consideration paid to me by said assignee, the receipt of which is hereby acknowledged, I as the inventor or as one of the inventors, hereinafter the assignor(s), do hereby assign, sell and transfer unto said assignee the full and exclusive right, title and interest in and to said application and the inventions and improvements therein disclosed for the United States and all foreign countries and any Letters Patent which may issue therefor in the United States and all foreign countries and all divisions, reissues, continuations, continuations-in-part, renewals and/or extensions thereof. Such assignment extends to the full ends of the terms of these applications and patents as fully and entirely as the same would have been held and enjoyed by me had this Assignment not been made.

I hereby authorize and request any attorney associated with The Webb Law Firm, Customer No. 28289, to insert here in parentheses (Application No. \_\_\_\_\_, filed \_\_\_\_\_) the filing date and application number of said application when known.

I covenant that I am the lawful owner(s) of said application, inventions and improvements, that the same are unencumbered, that no license has been granted to make, use or vend the said inventions or improvements or any of them, and that I have the full right to make this Assignment.

DOMESTIC

Application No. PCT/US2016/025264

Attorney Docket No. 6333-1511025

And for the consideration aforesaid, I agree individually and, if applicable, jointly that I will communicate to said assignee or the representatives thereof any facts known to me respecting said inventions and improvements, and will, upon request but without expense to me, testify in any legal proceedings, sign all lawful papers, execute all divisional, reissue, continuation, continuation-in-part, renewal and/or extension applications, make all rightful oaths, and generally do all other and further lawful acts deemed necessary or expedient by said assignee or by counsel for said assignee to assist or enable said assignee to obtain and enforce full benefits from the rights and interests herein assigned. This Assignment shall be binding upon my heirs, executors, administrators and/or assigns, and shall inure to the benefit of the heirs, executors, administrators, successors and/or assigns, as the case may be, of said assignee.

1. FULL NAME OF ASSIGNOR:

Robert G. Svitek

RESIDENCE:

Freeport, PA

EXECUTED this 9 day of September, 2016

Robert G. Svitek

SIGNATURE

STATE of Pennsylvania

COUNTY of Allegheny

On this 9 day of September, in the year 2016, before me Thomas Wolfenbaugh

DAY

MONTH

YEAR

NOTARY PUBLIC NAME

a notary public

Robert G. Svitek

public, personally appeared

NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of Pennsylvania that the foregoing paragraph is true and correct.

Witness my hand and official seal.

COMMONWEALTH OF PENNSYLVANIA  
NOTARIAL SEAL  
Thomas Wolfenbaugh, Notary Public  
O'Hara Twp., Allegheny County  
My Commission Expires March 15, 2020  
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Thomas Wolfenbaugh  
NOTARY PUBLIC

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Checked Box indicates 4 additional page(s) for inventor signatures.

Application No. PCT/US2016/025264

DOMESTIC

Attorney Docket No. 6333-1511025

2. FULL NAME OF ASSIGNOR:

RESIDENCE:

Jerry Stokes

Sarver, PA

EXECUTED this 9 day of September, 2016

[Signature]  
SIGNATURE

STATE of Pennsylvania)

COUNTY of Allegheny)

On this 9 day of September, in the year 2016, before me Thomas W. Wolfenbaugh,  
DAY MONTH YEAR NOTARY PUBLIC NAME

a notary public, personally appeared Jerry Stokes,  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of Pennsylvania that the foregoing paragraph is true and correct.

Witness my hand and official seal.

COMMONWEALTH OF PENNSYLVANIA  
NOTARIAL SEAL  
Thomas Wolfenbaugh, Notary Public  
O'Hara Twp., Allegheny County  
My Commission Expires March 15, 2020  
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

[Signature]  
NOTARY PUBLIC

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3. FULL NAME OF ASSIGNOR:

RESIDENCE:

Patrick A. Kelly

North Huntingdon, PA

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 2016

\_\_\_\_\_  
SIGNATURE

STATE of \_\_\_\_\_)

COUNTY of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_,  
DAY MONTH YEAR NOTARY PUBLIC NAME

a notary public, personally appeared Patrick A. Kelly,  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC

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Application No. PCT/US2016/025264 DOMESTIC  
Attorney Docket No. 6333-1511025

2. FULL NAME OF ASSIGNOR: Jerry Stokes RESIDENCE: Sarver, PA

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_, 2016

STATE of \_\_\_\_\_ )  
COUNTY of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_,  
DAY MONTH YEAR NOTARY PUBLIC NAME  
a notary public, personally appeared Jerry Stokes  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC

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3. FULL NAME OF ASSIGNOR: Patrick A. Kelly RESIDENCE: North Huntingdon, PA

EXECUTED this 21<sup>st</sup> day of SEPTEMBER, 2016

STATE of Pennsylvania )  
COUNTY of Allegheny )

On this 21 day of September, in the year 2016, before me Thomas Weifenbaugh,  
DAY MONTH YEAR NOTARY PUBLIC NAME  
a notary public, personally appeared Patrick A. Kelly  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of Pennsylvania that the foregoing paragraph is true and correct.

Witness my hand and official seal.

COMMONWEALTH OF PENNSYLVANIA  
NOTARIAL SEAL  
Thomas Weifenbaugh, Notary Public  
O'Hara Twp., Allegheny County  
My Commission Expires March 16, 2020  
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

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NOTARY PUBLIC

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DOMESTIC

Application No. PCT/US2016/025264

Attorney Docket No. 6333-1511025

4. FULL NAME OF ASSIGNOR:  
Anthony McCoppin

RESIDENCE:  
Blawnox, PA

EXECUTED this 9 day of Sept, 2016

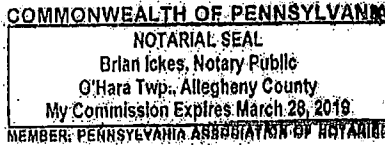
Anthony S. McCoppin  
SIGNATURE

STATE of Pennsylvania  
COUNTY of Allegheny

On this 9 day of September, in the year 2016 before me Brian Ickes  
DAY MONTH YEAR NOTARY PUBLIC NAME  
a notary public, personally appeared Anthony McCoppin  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of Pennsylvania that the foregoing paragraph is true and correct.



Witness my hand and official seal.  
Brian Ickes  
NOTARY PUBLIC

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5. FULL NAME OF ASSIGNOR:  
Patrick A. Murawski

RESIDENCE:  
Pittsburgh, PA

EXECUTED this 9<sup>TH</sup> day of SEPTEMBER, 2016

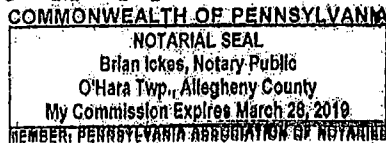
Patrick A. Murawski  
SIGNATURE

STATE of Pennsylvania  
COUNTY of Allegheny

On this 9 day of September, in the year 2016 before me Brian Ickes  
DAY MONTH YEAR NOTARY PUBLIC NAME  
a notary public, personally appeared Patrick A. Murawski  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of Pennsylvania that the foregoing paragraph is true and correct.



Witness my hand and official seal.  
Brian Ickes  
NOTARY PUBLIC

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Application No. PCT/US2016/025264

DOMESTIC

Attorney Docket No. 6333-1511025

6. FULL NAME OF ASSIGNOR:  
Travis Deschamps

RESIDENCE:  
Pittsburgh, PA

EXECUTED this 9th day of September, 2016.

[Signature]  
SIGNATURE

STATE of Pennsylvania

COUNTY of Allegheny

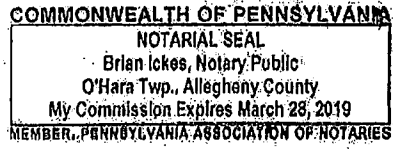
On this 9 day of September, in the year 2016, before me Brian Ickes  
DAY MONTH YEAR NOTARY PUBLIC NAME

a notary public, personally appeared Travis Deschamps  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of Pennsylvania that the foregoing paragraph is true and correct.

Witness my hand and official seal.



[Signature]  
NOTARY PUBLIC

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7. FULL NAME OF ASSIGNOR:  
Patrick E. Lutz

RESIDENCE:  
Pittsburgh, PA

EXECUTED this \_\_\_ day of \_\_\_\_\_, 2016.

\_\_\_\_\_  
SIGNATURE

STATE of \_\_\_\_\_)

COUNTY of \_\_\_\_\_)

On this \_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_  
DAY MONTH YEAR NOTARY PUBLIC NAME

a notary public, personally appeared Patrick E. Lutz  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

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DOMESTIC

Application No. «petsumm PREGNUM»

Attorney Docket No. «matter cltcode»-«matter matcode»

8. FULL NAME OF ASSIGNOR:  
John C. Marous, III

RESIDENCE:  
Pittsburgh, PA

EXECUTED this 9<sup>th</sup> day of Sept, 2016

[Signature]  
SIGNATURE

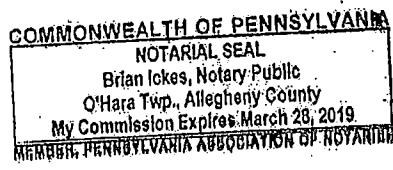
STATE of Pennsylvania

COUNTY of Allegheny

On this 9 day of September, in the year 2016, before me, Brian Ickes,  
DAY MONTH YEAR NOTARY PUBLIC NAME  
a notary public, personally appeared John C. Marous, III,  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of Pennsylvania that the foregoing paragraph is true and correct.



Witness my hand and official seal,  
[Signature]  
NOTARY PUBLIC

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**ASSIGNMENT**

WHEREAS, as a below named inventor, I have invented certain new and useful improvements in

CANNULA SYSTEM WITH STERILE CONNECTOR, BLOOD PUMP, AND PATIENT  
HARNESS

(Invention Title)

for which a United States Provisional Patent application was filed on 03/31/2015 (mm/dd/yyyy) and bears Application Number 62/140,778 (hereinafter "said application").

AND/OR

for which I have this day executed an application for a United States Patent (hereinafter "said application").

AND/OR

for which an application for a United States Patent was filed on \_\_\_\_\_ (mm/dd/yyyy) and bears Application Number \_\_\_\_\_ (hereinafter "said application").

AND/OR

for which an international patent application was filed under the Patent Cooperation Treaty on 03/31/2016 (mm/dd/yyyy), bearing Application No. PCT/US2016/025264 (hereinafter "said application").

AND, WHEREAS, Cardiac Assist, Inc., a corporation of Delaware, having a place of business at 240 Alpha Drive, Pittsburgh, Pennsylvania, 15238, hereinafter called the "assignee", is desirous of acquiring the entire right, title, and interest in and to said application and the inventions and improvements therein disclosed.

NOW, THEREFORE, for good and valuable consideration paid to me by said assignee, the receipt of which is hereby acknowledged, I as the inventor or as one of the inventors, hereinafter the assignor(s), do hereby assign, sell and transfer unto said assignee the full and exclusive right, title and interest in and to said application and the inventions and improvements therein disclosed for the United States and all foreign countries and any Letters Patent which may issue therefor in the United States and all foreign countries and all divisions, reissues, continuations, continuations-in-part, renewals and/or extensions thereof. Such assignment extends to the full ends of the terms of these applications and patents as fully and entirely as the same would have been held and enjoyed by me had this Assignment not been made.

I hereby authorize and request any attorney associated with The Webb Law Firm, Customer No. 28289, to insert here in parentheses (Application No. \_\_\_\_\_, filed \_\_\_\_\_) the filing date and application number of said application when known.

I covenant that I am the lawful owner(s) of said application, inventions and improvements, that the same are unencumbered, that no license has been granted to make, use or vend the said inventions or improvements or any of them, and that I have the full right to make this Assignment.

And for the consideration aforesaid, I agree individually and, if applicable, jointly that I will communicate to said assignee or the representatives thereof any facts known to me respecting said inventions and improvements, and will, upon request but without expense to me, testify in any legal proceedings, sign all lawful papers, execute all divisional, reissue, continuation, continuation-in-part, renewal and/or extension applications, make all rightful oaths, and generally do all other and further lawful acts deemed necessary or expedient by said assignee or by counsel for said assignee to assist or enable said assignee to obtain and enforce full benefits from the rights and interests herein assigned. This Assignment shall be binding upon my heirs, executors, administrators and/or assigns, and shall inure to the benefit of the heirs, executors, administrators, successors and/or assigns, as the case may be, of said assignee.

1. FULL NAME OF ASSIGNOR:

RESIDENCE:

Robert G. Svitek

Freeport, PA

EXECUTED this      day of     , 2017

\_\_\_\_\_  
SIGNATURE

STATE of \_\_\_\_\_)

COUNTY of \_\_\_\_\_)

On this      day of     , in the year     , before me \_\_\_\_\_,

a notary public, personally appeared Robert G. Svitek,  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC

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Checked Box indicates 4 additional page(s) for inventor signatures.

DOMESTIC

Application No. PCT/US2016/025264

Attorney Docket No. 6333-1511025

2. FULL NAME OF ASSIGNOR:

RESIDENCE:

Jerry Stokes

Sarver, PA

EXECUTED this \_\_\_\_ day of \_\_\_\_\_, 2017

\_\_\_\_\_  
SIGNATURE

STATE of \_\_\_\_\_)

COUNTY of \_\_\_\_\_)

On this \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_,

a notary public, personally appeared Jerry Stokes,

NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

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NOTARY PUBLIC

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3. FULL NAME OF ASSIGNOR:

RESIDENCE:

Patrick A. Kelly

North Huntingdon, PA

EXECUTED this \_\_\_\_ day of \_\_\_\_\_, 2017

\_\_\_\_\_  
SIGNATURE

STATE of \_\_\_\_\_)

COUNTY of \_\_\_\_\_)

On this \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_,

a notary public, personally appeared Patrick A. Kelly,

NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

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NOTARY PUBLIC

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DOMESTIC

Application No. PCT/US2016/025264

Attorney Docket No. 6333-1511025

4. FULL NAME OF ASSIGNOR:

RESIDENCE:

Anthony McCoppin

Blawnox, PA

EXECUTED this \_\_\_\_ day of \_\_\_\_\_, 2017

\_\_\_\_\_  
SIGNATURE

STATE of \_\_\_\_\_)

COUNTY of \_\_\_\_\_)

On this \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_,  
DAY MONTH YEAR NOTARY PUBLIC NAME

a notary public, personally appeared Anthony McCoppin,  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC

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5. FULL NAME OF ASSIGNOR:

RESIDENCE:

Patrick A. Murawski

Pittsburgh, PA

EXECUTED this \_\_\_\_ day of \_\_\_\_\_, 2017

\_\_\_\_\_  
SIGNATURE

STATE of \_\_\_\_\_)

COUNTY of \_\_\_\_\_)

On this \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_,  
DAY MONTH YEAR NOTARY PUBLIC NAME

a notary public, personally appeared Patrick A. Murawski,  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

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NOTARY PUBLIC

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Application No. PCT/US2016/025264

DOMESTIC

Attorney Docket No. 6333-1511025

6. FULL NAME OF ASSIGNOR:

Travis Deschamps

RESIDENCE:

Pittsburgh, PA

EXECUTED this 22<sup>nd</sup> day of June, 2017

SIGNATURE

STATE of \_\_\_\_\_ )

COUNTY of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_,

a notary public, personally appeared Travis Deschamps,

NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

NOTARY PUBLIC

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7. FULL NAME OF ASSIGNOR:

Patrick E. Lutz

RESIDENCE:

Pittsburgh, PA

EXECUTED this 22<sup>nd</sup> day of June, 2017

SIGNATURE

STATE of Maryland )

COUNTY of Carroll )

On this 22<sup>nd</sup> day of June, in the year 2017, before me Monica G. Rosen,

NOTARY PUBLIC NAME

a notary public, personally appeared Patrick E. Lutz,

NAME OF DOCUMENT SIGNER

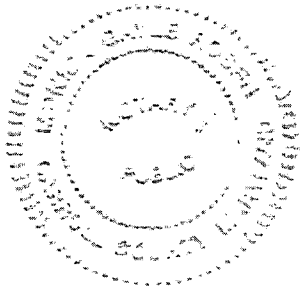
proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of Maryland that the foregoing paragraph is true and correct.

Witness my hand and official seal.

NOTARY PUBLIC

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Application No. PCT/US2016/025264

Attorney Docket No. 6333-1511025

8. FULL NAME OF ASSIGNOR:

RESIDENCE:

John C. Marous, III

Pittsburgh, PA

EXECUTED this \_\_\_\_ day of \_\_\_\_\_, 2017

\_\_\_\_\_  
SIGNATURE

STATE of \_\_\_\_\_)

COUNTY of \_\_\_\_\_)

On this \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me \_\_\_\_\_,

a notary public, personally appeared John C. Marous, III,  
NAME OF DOCUMENT SIGNER

proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

I certify under Penalty of Perjury under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct.

Witness my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC

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**CORRECTIVE ASSIGNMENT**

WHEREAS, **CardiacAssist, Inc.**, a corporation of Delaware, having a place of business at **240 Alpha Drive, Pittsburgh, Pennsylvania 15238**, is the owner of interests in the United States issued patents and patent applications listed on Schedule A, attached hereto by assignment (hereinafter "said United States patents and applications"); and

WHEREAS, **CardiacAssist, Inc.**, has been erroneously named as "Cardiac Assist, Inc." in some assignments of rights and/or conveyances of security interests in said United States patents and applications (hereinafter "affected assignment documents"); and

WHEREAS, **CardiacAssist, Inc.**, at times has been referred to as "Cardiac Assist, Inc." during the normal course of business; and

WHEREAS the naming of **CardiacAssist, Inc.** as "Cardiac Assist, Inc." in any of the affected assignment documents was inadvertant, erroneous, and unintentional; and

WHEREAS **CardiacAssist, Inc.** desires to correct the affected assignment documents and the chain of title in said United States patents and applications with the correct formal entity name of **CardiacAssist, Inc.**, as it appears on its Certificate of Good Standing, attached hereto.

NOW, THEREFORE, **CardiacAssist, Inc.** hereby testifies that any assignment of any interest to or from "Cardiac Assist, Inc." in the affected assignment documents of said United States patents and applications was made to, or by, **CardiacAssist, Inc.**

AND, **CardiacAssist, Inc.** hereby authorizes and requests the United States Commissioner for Patents to record this corrective assignment.

IN TESTIMONY WHEREOF, **CardiacAssist, Inc.** has caused this assignment to be executed effective the 14<sup>th</sup> day of September, 2017.

**CardiacAssist, Inc.**

By: 

Name: John Marous

Title: CEO

Rob Svitek

Witness



SCHEDULE A

Attorney Docket Number	U.S. or PCT Application No.	U.S. Patent No.	Filing Date/ Issue Date	Invention Title
6333-102814	11/328,961	8,550,973	01/09/2006 / 10/08/2013	Percutaneous Right Ventricular Assist Apparatus and Method
6333-133603	14/035,087	8,979,742	09/24/2013 / 03/17/2015	Pumping System and Method for Assisting a Patient's Heart
6333-140084	14/232,643	9,532,898	07/16/2012 / 01/03/2017	Apparatus and Method for Rapidly Cooling or Heating the Body Temperature of a Patient
6333-140693	14/570,412	N/A	12/15/2014 / N/A	Percutaneous Right Ventricular Assist Apparatus and Method
6333-151844	14/615,496	9,168,334	02/6/2015 / 10/27/2015	Pumping System and Method for Assisting a Patient's Heart
6333-153086	PCT/US2015/020733	N/A	03/16/2015 / N/A	Image Guided Transseptal Puncture Device
6333-155555	14/810,701	9,446,183	07/28/2015 / 09/20/2016	Pumping System and Method for Assisting a Patient's Heart
6333-1702790	15/516,453	N/A	10/02/2015 / N/A	VA ECMO with Pulmonary Artery Ventilation
6333-140730	61/953,011	N/A	3/14/2014 / N/A	Image Guided Transseptal Puncture Device
6333-145692	62/140,778	N/A	3/31/2015 / N/A	Cannula System with Sterile Connector, Blood Pump, and Patient Harness
6333-146650	62/059,033	N/A	10/2/2014 / N/A	VA ECMO with Pulmonary Artery Ventilation
6333- 1603991	15/360,476	N/A	11/23/2016 / N/A	Apparatus and Method for Rapidly Cooling or Heating the Body Temperature of a Patient

6333-159853	PCT/US2015/053781	N/A	10/2/2015 / N/A	VA ECMO with Pulmonary Artery Ventilation
6333-1511025	PCT/US2016/025264	N/A	03/31/2016 / N/A	Cannula System with Sterile Connector, Blood Pump, and Patient Harness
6333-111566	61/508,257	N/A	7/15/2011 / N/A	Apparatus and Method for Rapidly Cooling or Heating the Body Temperature of a Patient
6333-122125	PCT/US2012/046853	N/A	07/16/2012 / N/A	Apparatus and Method for Rapidly Cooling or Heating the Body Temperature of a Patient

# Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CARDIACASSIST, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



2586146 8300

SR# 20176160483

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203224347

Date: 09-14-17