

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT6038431

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	ASSIGNMENT	
CONVEYING PARTY DATA		
	Name	Execution Date
	JUAN LOPEZ	03/30/2020
RECEIVING PARTY DATA		
Name:	VIVE HEALTH LLC	
Street Address:	8955 FONTANA DEL SOL WAY	
City:	NAPLES	
State/Country:	FLORIDA	
Postal Code:	34109	
PROPERTY NUMBERS Total: 1		
Property Type	Number	
Application Number:	29729801	
CORRESPONDENCE DATA		
Fax Number:	(801)328-1707	
<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:	801-533-9800	
Email:	nbarrigar@wnlaw.com	
Correspondent Name:	WORKMAN NYDEGGER	
Address Line 1:	60 EAST SOUTH TEMPLE	
Address Line 2:	SUITE 1000	
Address Line 4:	SALT LAKE CITY, UTAH 84111	
ATTORNEY DOCKET NUMBER:	22047.87	
NAME OF SUBMITTER:	DAVID P. JOHNSON	
SIGNATURE:	/David P. Johnson/	
DATE SIGNED:	03/30/2020	
Total Attachments: 3		
source=22047-87_Dec_assignment#page1.tif		
source=22047-87_Dec_assignment#page2.tif		
source=22047-87_Dec_assignment#page3.tif		

COMBINED DECLARATION and ASSIGNMENT
(Utility, Design, National Stage of PCT)

TITLE OF INVENTION: FINGER LADDER

As a below named inventor, I hereby declare that:

SPECIFICATION IDENTIFICATION

This declaration and assignment is directed to:

(complete (a), (b), or (c))

- (a) ☒ The attached application;
- (b) ☐ Previously filed United States Application No. _____, filed on _____; or
- (c) ☐ PCT International Application No. _____, filed on _____ (nationalized as United States Application No. _____, filed on _____).

I hereby authorize the patent attorneys and/or patent agents of Workman Nydegger to insert the above Application No(s). and filing date(s) when known.

DECLARATION AND ACKNOWLEDGEMENT

The above-identified application was made or authorized to be made by me.

I believe that I am the original inventor or an original joint inventor of a claimed invention in the above-identified application.

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claim(s).

I acknowledge the duty to disclose all information which is material to patentability as defined in 37 C.F.R. § 1.56, including for continuation-in-part applications, material information which

became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby acknowledge that any willful false statement made in this declaration is punishable under 18 U.S.C. § 1001 by fine or imprisonment of not more than five (5) years, or both.

ASSIGNMENT

The Assignee, VIVE HEALTH LLC, having a principal place of business at 8955 Fontana Del Sol Way, Naples, FL 34109, desires to secure the entire right, title and interest in the above-identified application and in the invention disclosed therein.

In consideration of One Dollar (\$1.00) and other good and valuable consideration paid to me by the Assignee, the receipt and sufficiency of which is hereby acknowledge, I HEREBY ASSIGN TO THE ASSIGNEE:

The entire right, title and interest in the above-identified application and in the invention disclosed therein and in all divisions, continuations and continuations-in-part of said application and in all corresponding applications filed in countries foreign to the United States and in all patents issuing thereon in the United States and foreign countries and in all reissues or extensions of patents granted thereon.

The right to file foreign patent applications on said invention in its own name, wherever such right may be legally exercised, including the right to claim the priority to or the benefit of the above-identified application including under all applicable treaties and conventions.

I hereby authorize and request the United States Commissioner of Patents and Trademarks, and such Patent Office officials in foreign countries as are duly authorized by their patent laws to issue patents, to issue any and all patents on said invention to the Assignee as the owner of the entire interest, for the sole use and behoof of the said Assignee, its successors, assigns and legal representatives.

I hereby agree, without further consideration and without expense, to sign all lawful papers and to perform all other lawful acts which the Assignee may request of me to make this Assignment fully effective, including, by way of example but not of limitation, the following:

Prompt execution of all original, divisional, continuation, continuation-in-part, substitute, reissue, and other United States and foreign patent applications on the invention, and all lawful documents requested by the Assignee to further the prosecution of any of such patent applications.

Cooperation to the best of my ability in: (1) proceedings relating to nullification, reissue, extension, post grant, inter parties, derivation, supplemental examination, and infringement involving the invention; (2) execution of all lawful documents involving the invention; and (3) the production of evidence involving the invention.

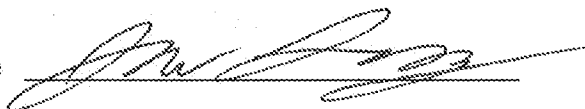
This assignment and agreement shall be binding upon my heirs and legal representatives.

SIGNATURE(S)

Full name of first inventor:

_____ Juan (GIVEN NAME)	_____ (MIDDLE INITIAL OR NAME)	_____ Lopez FAMILY (OR LAST NAME)
-------------------------------	-----------------------------------	---

Signature



Dated

03/30/2020