

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT7649117

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
AVITA MEDICAL PTY LIMITED	11/15/2022
RECEIVING PARTY DATA	
Name:	AVITA MEDICAL INC.
Street Address:	28159 AVENUE STANFORD
Internal Address:	SUITE 220
City:	VALENCIA
State/Country:	CALIFORNIA
Postal Code:	91355
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	16935977
CORRESPONDENCE DATA	
Fax Number:	(713)588-7050
<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:	17135887000
Email:	saramirez@vorys.com
Correspondent Name:	VORYS, SATER, SEYMOUR AND PEASE LLP
Address Line 1:	909 FANNIN STREET, SUITE 2700
Address Line 2:	SONIA RAMIREZ
Address Line 4:	HOUSTON, TEXAS 77010
ATTORNEY DOCKET NUMBER:	050797-000002
NAME OF SUBMITTER:	SONIA RAMIREZ
SIGNATURE:	/Sonia Ramirez/
DATE SIGNED:	11/16/2022
Total Attachments: 1	
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PATENT APPLICATION ASSIGNMENT

This assignment is made effective as of November 15, 2022, from AVITA Medical Pty Limited with a place of business at 28159 Avenue Stanford, Suite 220 Valencia, CA, 91355, United States of America ("ASSIGNOR"), to AVITA Medical Inc. with a place of business at 28159 Avenue Stanford, Suite 220 Valencia, CA, 91355, ("ASSIGNEE").

For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, ASSIGNOR hereby assigns to ASSIGNEE all of ASSIGNOR'S right, title, and interest to the following patent applications as well as any patent applications claiming priority thereto:

Patent Office	Application Number	Filing Date
USA	16/935,977	20-Jul-2020

ASSIGNOR hereby covenants that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this assignment. This assignment document may be signed in counterparts, and signature pages may be exchanged via electronic means such as via email or facsimile and will be deemed as originals.

IN WITNESS WHEREOF, ASSIGNOR has duly executed under seal and delivered this assignment, as of the day and year first above written.

By: **AVITA Medical Pty Limited (ASSIGNOR)**

By: **AVITA Medical, Inc. (ASSIGNEE)**

Signature: *James M Corbett*
 Printed Name: James M Corbett
 Date: 11/15/2022
 Title: Chief Executive Officer

Signature: *James M. Corbett*
 Printed Name: JAMES M. CORBETT
 Date: 11/15/2022
 Title: Chief Executive Officer

CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

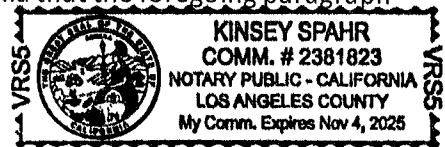
State of California County of Los Angeles
 On November 15, 2022 before me, Kinsey Spahr, Notary Public
 personally appeared James Corbett

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 *Kinsey Spahr*



(Seal)