

TRADEMARK ASSIGNMENT

Electronic Version v1.1
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SUBMISSION TYPE:		NEW ASSIGNMENT	
NATURE OF CONVEYANCE:		ASSIGNS THE ENTIRE INTEREST AND THE GOODWILL	
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
NDI Medical, LLC		02/16/2011	LIMITED LIABILITY COMPANY: OHIO
RECEIVING PARTY DATA			
Name:	SPR Therapeutics, LLC		
Street Address:	22901 Millcreek Boulevard, Suite 110		
City:	Cleveland		
State/Country:	OHIO		
Postal Code:	44122		
Entity Type:	LIMITED LIABILITY COMPANY: OHIO		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Registration Number:	3915196	SPR	
CORRESPONDENCE DATA			
Fax Number:	(262)783-1211		
	<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>		
Phone:	262 783-1300		
Email:	rkmp@rkmiplaw.com		
Correspondent Name:	Garet K. Galster		
Address Line 1:	Ryan Kromholz & Manion, S.C.		
Address Line 2:	P O Box 26618		
Address Line 4:	Milwaukee, WISCONSIN 53226-0618		
ATTORNEY DOCKET NUMBER:	9844.20577 41		
NAME OF SUBMITTER:	Garet K. Galster		
Signature:	/Garet K. Galster/		

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REEL: 004485 FRAME: 0471

Date:

02/23/2011

Total Attachments: 1

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ASSIGNMENT

NDI Medical, LLC, of 22901 Millcreek Boulevard, Suite 110, Cleveland, Ohio 44122, (hereinafter "ASSIGNOR") a limited liability company of the State of Ohio, being the owner by adoption and use of the following trademark: SPR, Reg. No. 3,915,196.

In consideration of One Dollar (\$1.00) and other good and valuable consideration, receipt of which is hereby acknowledged;

Hereby sells, assigns, and transfers to SPR Therapeutics, LLC, 22901 Millcreek Boulevard, Suite 110, Cleveland, Ohio 44122, (hereinafter ASSIGNEE) its successors and assigns, the entire right, title and interest in and to the said trademarks and the registrations thereof, together with the assets and goodwill of the business connected with the use of, and symbolized by, said marks and every right connected therewith, including all rights to damages and other remedies for past infringement of each identified trademark.

ASSIGNOR warrants that it is the sole owner of all rights referred to in this agreement and has secured them from any and all parties that have claimed, or may claim, or that might claim such rights by, through, or under said ASSIGNOR. ASSIGNOR further warrants that it has not abandoned the trademark(s) through non-use of said mark(s). This Assignment, including the terms and conditions contained within this Assignment, represents the complete and total agreement between the parties with regard to the assignment of said trademark(s). Any and all previous discussions or understandings with regard to said trademark(s), whether written or oral, are of no effect. This Assignment is to be interpreted according to the laws of the State of Wisconsin.

The undersigned, Geoffrey B. Thrope, declares: that he is the President of ASSIGNOR corporation and is authorized to execute this Assignment on behalf of said corporation.

Witness the hand and seal of said ASSIGNOR this 16th day of February, 2011.

NDI MEDICAL, LLC
By: Geoffrey B. Thrope
Geoffrey B. Thrope, President

STATE OF OHIO)
COUNTY OF WYANDOTA) SS

Personally came before me this 16th day of FEBRUARY, 2011, the above named Geoffrey B. Thrope, the President of NDI Medical, LLC, to me known to be the person who executed the foregoing Assignment, and acknowledged that he executed the foregoing Assignment as such officer as the free act and deed of said corporation, and by its authority.

[SEAL]



Jacqueline Greiner
Notary Public
My Commission expires: NOVEMBER 12, 2011