

## TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

ETAS ID: TM349720

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
Iroko Cardio LLC		11/28/2012	LIMITED LIABILITY COMPANY: DELAWARE
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Correvio LLC		
<b>Street Address:</b>	1350 Edgmont Ave., Suite 230		
<b>Internal Address:</b>	University Technology Park II		
<b>City:</b>	Chester		
<b>State/Country:</b>	PENNSYLVANIA		
<b>Postal Code:</b>	19013		
<b>Entity Type:</b>	LIMITED LIABILITY COMPANY: DELAWARE		
<b>PROPERTY NUMBERS Total: 3</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	4366123	CORREVIO	
<b>Registration Number:</b>	4366122		
<b>Registration Number:</b>	4373761	CORREVIO	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>			
<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>	202.662.5299		
<b>Email:</b>	trademarks@cov.com		
<b>Correspondent Name:</b>	Kathleen Gallagher-Duff		
<b>Address Line 1:</b>	One CityCenter, 850 Tenth Street NW		
<b>Address Line 2:</b>	Covington & Burling LLP		
<b>Address Line 4:</b>	Washington, D.C. 20001		
<b>ATTORNEY DOCKET NUMBER:</b>	033858.00013		
<b>NAME OF SUBMITTER:</b>	Miranda Horan, Paralegal		
<b>SIGNATURE:</b>	/MirandaHoran/		
<b>DATE SIGNED:</b>	07/30/2015		
<b>Total Attachments: 3</b>			

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### RECORDATION FORM COVER SHEET TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

**1. Name of conveying party(ies):**

Iroko Cardio LLC

- Individual(s)
- Partnership
- Corporation- State: \_\_\_\_\_
- Other Limited Liability Company
- Association
- Limited Partnership

Citizenship (see guidelines) Delaware

Additional names of conveying parties attached?  Yes  No

**3. Nature of conveyance/Execution Date(s) :**

Execution Date(s) 11/28/2012

- Assignment
- Security Agreement
- Other \_\_\_\_\_
- Merger
- Change of Name

**2. Name and address of receiving party(ies)**

Additional names, addresses, or citizenship attached?  Yes  No

Name: Correvio LLC

Street Address: 1350 Edgmont Ave., Ste 230

City: Chester

State: PA

Country: USA Zip: 19013

- Individual(s) Citizenship \_\_\_\_\_
- Association Citizenship \_\_\_\_\_
- Partnership Citizenship \_\_\_\_\_
- Limited Partnership Citizenship \_\_\_\_\_
- Corporation Citizenship \_\_\_\_\_
- Other LLC Citizenship Delaware

If assignee is not domiciled in the United States, a domestic representative designation is attached:  Yes  No  
(Designations must be a separate document from assignment)

**4. Application number(s) or registration number(s) and identification or description of the Trademark.**

A. Trademark Application No.(s) \_\_\_\_\_ Text \_\_\_\_\_

B. Trademark Registration No.(s)

4366123, 4366122, 4373761

Additional sheet(s) attached?  Yes  No

**C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):**

CORREVIO & Heart Design; Heart Design; CORREVIO

**5. Name & address of party to whom correspondence concerning document should be mailed:**

Name: Kathleen Gallagher-Duff, Esq.

Internal Address: \_\_\_\_\_

Street Address: Covington & Burling LLP

One CityCenter, 850 Tenth Street N.W.

City: Washington

State: DC Zip: 20001

Phone Number: 202.662.5299

Docket Number: 033858.00013

Email Address: trademarks@cov.com

**6. Total number of applications and registrations involved:**

3

**7. Total fee (37 CFR 2.6(b)(6) & 3.41) \$ 90.00**

- Authorized to be charged to deposit account
- Enclosed

**8. Payment Information:**

Deposit Account Number 033412

Authorized User Name Kathleen Gallagher-Duff

**9. Signature:**

Kathleen Gallagher-Duff  
Signature

Kathleen Gallagher-Duff

Name of Person Signing

July 30, 2013  
Date

Total number of pages including cover sheet, attachments, and document: 3

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:  
Mail Stop Assignment Recordation Branch, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

# Delaware

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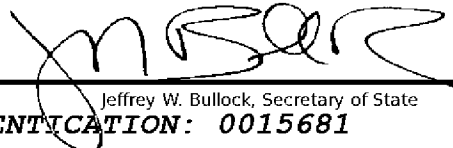
*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "IROKO CARDIO LLC", CHANGING ITS NAME FROM "IROKO CARDIO LLC" TO "CORREVIO LLC", FILED IN THIS OFFICE ON THE TWENTY-EIGHTH DAY OF NOVEMBER, A.D. 2012, AT 11:30 O'CLOCK A.M.

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Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0015681

DATE: 11-28-12

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


TRADEMARK  
REEL: 005588 FRAME: 0073

**STATE OF DELAWARE  
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: Iroko Cardio LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the Limited Liability Company is hereby changed to Correvio LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 28th day of November, A.D. 2012.

By:   
Authorized Person(s)

Name: Marc K. Furstein  
Print or Type