

900394191 02/07/2017

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM415257

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ASSIGNMENT OF THE ENTIRE INTEREST AND THE GOODWILL		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
NEW HAVEN PHARMACEUTICALS, INC.		02/01/2017	Corporation:
RECEIVING PARTY DATA			
Name:	NEW HAVEN (ASSIGNMENT FOR THE BENEFIT OF CREDITORS), LLC		
Street Address:	1100 LA AVENIDA STREET		
Internal Address:	BUILDING A		
City:	MOUNTAIN VIEW		
State/Country:	CALIFORNIA		
Postal Code:	94043		
Entity Type:	Limited Liability Company: UNITED STATES DELAWARE		
PROPERTY NUMBERS Total: 1			
Property Type	Number	Word Mark	
Serial Number:	86041501	DURLAZA	
CORRESPONDENCE DATA			
Fax Number:	4122810717		
<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:	(412) 454-5000		
Email:	docketingpgh@pepperlaw.com		
Correspondent Name:	PEPPER HAMILTON LLP		
Address Line 1:	500 GRANT STREET		
Address Line 2:	SUITE 5000		
Address Line 4:	PITTSBURGH, PENNSYLVANIA 15219-2507		
NAME OF SUBMITTER:	N. NICOLE STAKLEFF, REG. NO. 50229		
SIGNATURE:	/N. Nicole Stakleff/		
DATE SIGNED:	02/07/2017		
Total Attachments: 3			
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OP \$40.00 86041501

TRADEMARK ASSIGNMENT AGREEMENT

WHEREAS, by resolution of the board of directors of New Haven Pharmaceuticals, Inc., a Delaware corporation ("New Haven Pharmaceuticals" or "Assignor"), and with the consent of the requisite number of shareholders of New Haven Pharmaceuticals, on February 3, 2017, New Haven Pharmaceuticals, in accordance with the assignment for benefit of creditor laws of the State of Delaware, transferred ownership of all of its right, title and interest in and to all of its assets to New Haven (assignment for the benefit of creditors), LLC, a Delaware limited liability company ("Assignee"), and in so doing has also designated Assignee to act as the assignee for the benefit of creditors of New Haven Pharmaceuticals (the "General Assignment");

WHEREAS, Assignor and Assignee desire to memorialize the transfer of Assignor's trademarks and related rights to Assignee.

NOW, THEREFORE, BE IT KNOWN, pursuant to the General Assignment, Assignor has conveyed, assigned, transferred, delivered and set over to Assignee, its successors and assigns, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, all right, title and interest in and to any and all trademark rights and copyrights throughout the world, including any and all applications, registrations, and common law marks, together with the goodwill of the business associated with and symbolized by same, held by Assignor immediately prior to the consummation of the General Assignment, including those set forth in Schedule A hereto, together with all common law rights therein and the right to sue for past infringement of any and all of said trademarks.

IN WITNESS WHEREOF, Assignor has caused this Trademark Assignment to be signed by its duly authorized officer as of the date first written above.

By: 

Name: HARRY H. PENNER, JR.

Title: Chairman - New Haven Pharmaceuticals, Inc.

New Haven (Assignment for the benefit of Creditors),
LLC, in its sole and limited capacity as the assignee for
the benefit of creditors of New Haven Pharmaceuticals,
Inc.

By: 

Name: Michael J. Magan

Title: mgr.

Schedule A

Trademarks

"DURLAZA"

#23594333 yf

TRADEMARK

REEL: 005990 FRAME: 0872

ALL-PURPOSE ACKNOWLEDGMENT

STATE OF CT

COUNTY OF New Haven

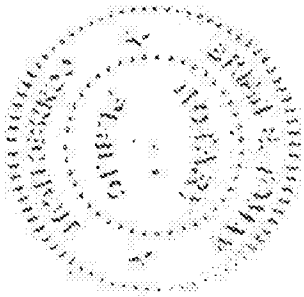
ss.

On 2.1.17 before me, Harry H. Penner Jr. Brian Toman
Date Name And Title Of Officer (e.g., "Jane Doe, Notary Public") manager
personally appeared Harry H. Penner Jr.
Name(s) of Signer(s)

- ☐ personally known to me
☒ 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.

WITNESS my hand and official seal.



Place Notary Seal Above

Brian E. Toman
Signature of Notary Public

OPTIONAL

BRIAN E. TOMAN
NOTARY PUBLIC
MY COMMISSION EXPIRES JULY 31, 2021

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer - Title(s): _____
☐ Partner - ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer is representing: _____

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