

TRADEMARK ASSIGNMENT COVER SHEET



Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM586516

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	ASSIGNMENT OF THE ENTIRE INTEREST AND THE GOODWILL		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Allos Therapeutics, Inc.		07/08/2020	Corporation: DELAWARE
RECEIVING PARTY DATA			
Name:	Acrotech Biopharma LLC		
Street Address:	279 Princeton-Hightstown Road		
City:	East Windsor		
State/Country:	NEW JERSEY		
Postal Code:	08520		
Entity Type:	Limited Liability Company: DELAWARE		
PROPERTY NUMBERS Total: 3			
Property Type	Number	Word Mark	
Registration Number:	3743409	FOLOTYN	
Registration Number:	3874614		
Registration Number:	3874615	FOLOTYN (PRALATREXATE INJECTION)	
CORRESPONDENCE DATA			
Fax Number:	3032680065		
<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:	303-268-0066		
Email:	Liz@AdseroIP.com		
Correspondent Name:	ADSERO IP		
Address Line 1:	8210 SOUTHPARK TERRACE		
Address Line 4:	LITTLETON, COLORADO 80120		
NAME OF SUBMITTER:	Thomas D Bratschun		
SIGNATURE:	/TD Bratschun/		
DATE SIGNED:	07/14/2020		
Total Attachments: 3			
source=Assignment - Allos to Acrotech - Executed#page1.tif			
source=Assignment - Allos to Acrotech - Executed#page2.tif			
source=Assignment - Allos to Acrotech - Executed#page3.tif			

OP \$90.00 3743409

Exhibit A

DOCKET#	MARK	APP#	FILED	REG#	REGDT
0003.10-TM	FOLOTYN	78881722	May 11, 2006	3743409	Jan 26, 2010
0003.22-TM	 Flower Design	77813878	Aug 27, 2009	3874614	Nov 9, 2010
0003.23-TM	FOLOTYN (and design) 	77813881	Aug 27, 2009	3874615	Nov 9, 2010

California All-Purpose Certificate of Acknowledgment

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Orange

s.s.

On 7/8/2020 before me, Linda Williams, Notary Public
Name of Notary Public, Title

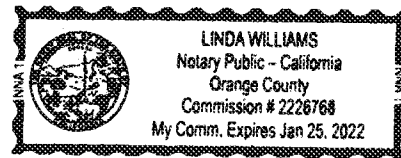
personally appeared Keith M. McGahan
Name of Signer (1)

N/A

Name of Signer (2)

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.

Linda Williams

Signature of Notary Public
Linda Williams

Seal

OPTIONAL INFORMATION

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of TRADEMARK ASSIGNMENT
 (Actual Use)

containing two pages, and dated _____

The signer(s) capacity or authority is/~~are~~ as:

- Individual(s)
- Attorney-in-fact
- Corporate Officer(s) President & Secretary
Title(s)
- Guardian/Conservator
- Partner - Limited/General
- Trustee(s)
- Other: _____

representing: Allos Therapeutics, Inc.
Name of Person(s) Entitled to Sign as Representative

Additional Information
Method of Signer Identification Proved to me on the basis of satisfactory evidence: <input checked="" type="checkbox"/> form(s) of identification <input type="checkbox"/> credible witness(es)
Notarial event is detailed in notary journal on: Page # <u>71</u> Entry # <u>5</u>
Notary contact: <u>949-743-9239</u>
Other <input type="checkbox"/> Additional Signer <input type="checkbox"/> Signer(s) Thumbprints(s) <input type="checkbox"/> _____