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TO: KNOBBE, MARTENS, OLSON & BEAR, LLP COMPANY: 2040 MAIN STREET, 14TH FLOOR

06/29/2009 11:58 FAX 949 780 9502

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06/29/2009
700411812

Client Code: VASCL.UCC1

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

To the Director, U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): (List using letters or numbers for multiple parties)</p> <p>VASCULAR CLOSURE SYSTEMS, INC.</p> <p><input type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Association <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other: <input checked="" type="checkbox"/> Corporation of: CA</p> <p>Additional name(s) of conveying party(ies) attached? . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies):</p> <p>Name: KNOBBE, MARTENS, OLSON & BEAR LLP Internal Address: FOURTEENTH FLOOR Street Address: 2040 MAIN STREET City: IRVINE State: CA ZIP: 92614</p> <p><input type="checkbox"/> Individual <input type="checkbox"/> General Partnership <input type="checkbox"/> Association <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Other: Limited Liability Partnership CALIFORNIA</p> <p>If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Additional name(s) and address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance:</p> <p><input type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement <input type="checkbox"/> Merger <input type="checkbox"/> Change of Name <input checked="" type="checkbox"/> Other: Security Interest</p> <p>Execution Date: (List as in section 1 if multiple signatures) JUNE 19, 2009</p>	<p>4. Application number(s) or registration number(s):</p> <p>a. Trademark Application No(s): 77476901</p> <p>b. Trademark Registration No(s):</p> <p>Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>5. Party to whom correspondence concerning document should be mailed:</p> <p>Customer No. 20,995 Address: Knobbe, Martens, Olson & Bear, LLP 2040 Main Street, 14th Floor Irvine, CA 92614 Return Fax: (949) 780-9502 Attorney's Docket No.: VASCL.UCC1</p>	<p>6. Total number of applications and registrations involved: 1</p> <p>7. Total fee (37 CFR 1.21(h)): \$40.00 <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p>
<p>8. Deposit account number: 11-1410</p> <p>Please charge this account for any additional fees which may be required, or credit any overpayment to this account.</p>	
<p>9. Statement and signature.</p> <p>To the best of my knowledge and belief, the foregoing information is true and correct, and any attached copy is a true copy of the original document.</p> <p>STEVEN NATAUPSKY <u>SA [Signature]</u> <u>6/29/09</u> Name of Person Signing Signature Date</p> <p>Total number of pages including cover sheet, attachments and document: 4</p>	

CH \$40.00 111410 77476901

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TO: KNOBBE, MARTENS, OLSON & BEAR, LLP COMPANY: 2040 MAIN STREET, 14TH FLOOR

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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional) MILLER (949) 760-0404

B. SEND ACKNOWLEDGMENT TO: (Name and Address) Knobbe, Martens, Olson & Bear, LLP 2040 Main Street, 14th Floor Irvine, CA 92614 USA

DOCUMENT NUMBER: 21431280002 FILING NUMBER: 09-7189885563 FILING DATE: 06/19/2009 14:50 IMAGE GENERATED ELECTRONICALLY FOR WEB FILING THE ABOVE SPACE IS FOR CA FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME Vascular Closure Systems, Inc. OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS 1787 Verdite Street CITY Livermore STATE CA POSTAL CODE 94550 COUNTRY USA

1d. SEE INSTRUCTIONS ADD'L DEBTOR INFO 1e. TYPE OF ORGANIZATION Incorporation 1f. JURISDICTION OF ORGANIZATION CA 1g. ORGANIZATIONAL ID#, if any NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

2d. SEE INSTRUCTIONS ADD'L DEBTOR INFO 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID#, if any NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME Knobbe, Martens, Olson & Bear LLP OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS 2040 Main Street - Fourteenth Floor CITY Irvine STATE CA POSTAL CODE 92614 COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral: See Attachment(s)

5. ALT DESIGNATION: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG. LIEN NON-UCC FILING

6. This FINANCING STATEMENT is to be filed for record (or recorded) in the REAL ESTATE RECORDS Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional) All Debtors Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA VASCL

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All of debtor's intellectual property that is or has ever been the subject of secured party's representation and all files and records relating thereto, any recoveries from litigation involving such intellectual property, including, without limitation, any judgments, amounts paid in settlement, insurance proceeds and any awards of attorney's fees and costs, and any other proceeds of such intellectual property, including, but not limited to, the property described below.

U.S. Patent & Patent Applications

Application No.	App. Filing Date	Patent No.	Issued Date	Title of Invention
11/933129	10/31/2007	7105776	4/11/2008	ARTERIOLOGY CLOSURE DEVICES TECHNIQUES
11/930111	10/31/2007			ARTERIOLOGY CLOSURE DEVICES AND TECHNIQUES
11/279242	4/10/2008			ARTERIOLOGY CLOSURE DEVICES AND TECHNIQUES
12/167212	7/22/008			ARTERIOLOGY CLOSURE DEVICES AND TECHNIQUES
12/63322	10/17/2008			ARTERIOLOGY CLOSURE DEVICES AND TECHNIQUES

U.S. Trademark Application

Application No.	App. Filing Date	Registration No.	Reg. Date	Trademark Name
77476901	5/16/2008			FASTSPAL

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Case No.	Trademark Name:	Application No.	Filing Date:	PubDate:
VASCL.003T	FASTSEAL	77/476901	5/16/2008	

10/14/2008