

Señores
DIRECCION DE NUEVAS CREACIONES
SUPERINTENDENCIA DE INDUSTRIA Y COMERCIO
Bogotá, D.C.

SUPERINTENDENCIA DE INDUSTRIA Y COMERCIO



No. 14-121983- -00003-0000

Fecha: 2014-08-12 12:10:15 Dep. 2020 DIR.NUEVASCR
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Act. 444 RESPUESTAREQUE Folios: 24

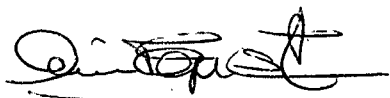
Re.: Código 011-378-444
Expediente No. 14-121.983
Fase nacional de Solicitud
de Patente PCT
MEDIMMUNE, LLC

En relación con el expediente de la referencia y dando cumplimiento a la última providencia recaída sobre este asunto por medio del presente escrito me permito manifestarles lo siguiente:

1. Adjunto una copia del poder conferido por la sociedad MEDIMMUNE, LLC, debidamente firmado por el representante de la empresa.
2. Acompaño los documentos que acreditan la cesión de los inventores a la sociedad solicitante.
3. Acompaño igualmente una copia del escrito radicado el pasado 24 de Junio de 2014 mediante la cual se presentó la descripción y reivindicaciones en formato pdf.

Renuncio al término faltante de traslado, y les solicito ordenar la publicación del extracto.

De Ustedes Atentamente,


LUIS FELIPE CASTILLO GIBRONE
T.P. No. 68.995 del C.S.J.

Castillo Grau & Associates

Law Offices
P.O. Box 251473
Bogotá, Colombia

FOR PATENTS AND TRADEMARKS IN**COLOMBIA****PODER**

(1)

domiciliado en (2)

nombra al Dr. Germán Castillo Grau y/o Adriana
Castillo Gibsone y/o Luis Felipe Castillo Gibsone

.....
con oficinas en la Carrera 13 No. 37-43, Piso 12
en Bogotá, D.C., Colombia como sus
representantes con poder especial amplio y
suficiente, para recabar de las oficinas y
autoridades Colombianas, administrativas,
judiciales o de policía, en primera o segunda
instancia, la Obtención de Patentes de
Invención, Registro de Marcas, de Diseños
Industriales, de Nombres y Enseñas
Comerciales, de Registros Sanitarios, Nombres
de Dominio, Variedades Vegetales, lo mismo
que trasposos, extensiones, renovaciones,
cambios de nombre y domicilio, registro de
licencias de explotación y registro de licencias
de uso referentes a tales actuaciones, a cuyo
efecto les faculta para dar ante dichas
autoridades todos los pasos necesarios al objeto
indicado, elevar solicitudes, formular
descripciones, enmiendas, protestas,
declaraciones, apelaciones y reclamos, solicitar
la aplicación de medidas cautelares, aceptar en
nuestro nombre y representación la Cesión de
derechos de invención y de patente de invención
que se nos haga por cualquier persona, abonar
todos los impuestos cuotas y pagos
determinados por la ley, recibir todos los
documentos y valores dando el descargo
respectivo, llenar cualesquiera otros requisitos,
desistir, y tomar en fin todas las medidas que
creyeran conducentes al resguardo de nuestros
intereses y en caso de presentarse oposiciones
para que intervengan como demandantes o
como demandados, con todas las demás
facultades legales necesarias. Este poder
comprende además las facultades de recibir,
desistir, transigir, comprometer, sustituir, revocar
sustituciones, recibir notificaciones y nombrar
apoderados judiciales o extra-judiciales

Dado y firmado en (4)

Firma/Signature

Laurie L. Hill, Vice President of Intellectual Property, MedImmune, LLC

Corporate Seal to be Affixed (not mandatory)

POWER OF ATTORNEY

(1) MedImmune, LLC

domiciled in (2) One MedImmune Way,
Gaithersburg, MD 20878,
UNITED STATES OF AMERICA

hereby appoint Dr. Germán Castillo Grau and/or
Adriana Castillo-Gibsone and/or Luis Felipe
Castillo-Gibsone

.....
with offices at Carrera 13 No. 37-43, 12th Floor in
Bogotá, Colombia as our representatives with
special ample and sufficient power to obtain from
the offices and Colombian authorities,
administrative, judicial and police, in first or in
second instance, Patents of Invention,
registration of Trade or Service Marks, Industrial
Designs, of Commercial Names and Ensigns,
Health and Sanitary Registrations, Domain
Names, Plant Varieties, as well as assignments,
extensions, renewals, changes of names and
addresses, registration of licences of exploitation
and licences of use referring to said actions who
are empowered to take before said authorities all
of the necessary steps for the purposes
indicated, to file applications, to formulate
descriptions, corrections, protests, declarations,
appeals and claims, apply for precautionary
measures, to accept on our behalf and
representation the assignment of rights on
invention and titles of invention that may be done
to us by any person, to pay all taxes, quotas and
payments prescribed by law, to receive all the
documents and proceeds giving the respective
acquittance or receipt, to fulfill any other
requisites to desist and take in fact any other
measures that may be deemed conducive to the
safeguard of our interests, and in case
oppositions are presented to intervene as
plaintiff or defendant, with all necessary legal
faculties. This power includes the faculties to
receive, desist, compromise, transact, substitute
it in all or in part, to revoke substitutions, to
receive notifications and to appoint judicial or
extra-judicial attorneys.

This Power of Attorney is specific for the
application corresponding to
PCT/US2012/066038

Given and signed in (4)

Maryland

DECLARACIÓN NOTARIAL

(Individual)

A los días del mes de de
compareci... personalmente ante mí, Notario
Público.....

A quien(es) doy fé de conocer y me consta que
es(son) la(s) persona(s) descrita(s) y firmante(s)
del documento que precede, declarando ante mí
que otorga(n) el mismo para los fines y
propósitos que en él se expresan.

El Notario Público

(Sociedades)

El infrascrito Notario certifica: que la firma que

antecede y dice

.....
es auténtica; que el signatario desempeña el

cargo de

.....
de

que tiene facultad para otorgar este poder; y que

dicha compañía está domiciliada
en.....

y actualmente existe y está organizada de

acuerdo a las leyes de

.....
Todos los hechos anteriores le constan por

haber examinado los documentos respectivos y

de todo ello da fe..

Dado y firmado en.....

El Notario Público

(Con Legalización Consular)

NOTARIAL CERTIFICATE

(Individuals)

On this 10 day of July of 2014
personally appeared before me, a Notary Public,

BAUVIE L. HILL
to me known, and known to me be the person(s)
described in and who executed the foregoing
document, and he(they) duly acknowledged to
me that he(they) executed same for the uses
and purposes therein expressed.

Notary Public

(Corporations)

The undersigned Notary Public certifies: that

The preceeding signature reading

Laurie L. Hill
is authentic; that the signor at present fills the

post of

VP Intellectual Property

of MEDIMMUNE, LLC

and that he is empowered to grant this power;

and that said company is domiciled in.....

One Medimmune Way, Gaithersburg, MD 20878
United States of America

and actually exists and is organized in

accordance with the laws of

Delaware

all the foregoing facts are known to the Notary

due to his having examined the respective

documents to which he, the Notary, attests.

Ganted and signed
in.....

Rachel Caputo

Notary Public

(With Consular Legalization)

RACHEL CAPUTO
Notary Public-Maryland
Frederick County
My Commission Expires
April 10, 2017

VERIFICATION

STATE OF NEW YORK)
) ss:
COUNTY OF NEW YORK)

I verify that the attached document identified as:

Assignment

is a copy of the document as executed on March 1, 2012 by Philipp Steiner, on March 2, 2012 by David Tice, on March 8, 2012 by Partha S. Chowdhury and on March 12, 2012 by Zhan Xiao, to **MEDIMMUNE, LLC** of United States and corresponding foreign rights in connection with U.S. Serial No. 61/563,092 filed November 23, 2011.



John Wolfe

Subscribed and sworn to before me this 9th day of
July, 2014.

Amy Lewis
Notary Public

AMY LEWIS
Notary Public, State of New York
No. 01LE6180070
Qualified in Kings County
Certificate Filed in New York County
Commission Expires Jan. 7, 2016

ASSIGNMENT

WHEREAS We, the below named inventors [hereinafter referred to as Assignors], have made an invention entitled:

BINDING MOLECULES SPECIFIC FOR HER3 AND USES THEREOF

for which an application for United States Letters Patent is filed herewith or an application for United States Letters Patent was filed as application number 61/563,092 on November 23, 2011;

AND WHEREAS, MEDIMMUNE, LLC, a limited liability company formed under the laws of Delaware, whose post office address is One MedImmune Way, Gaithersburg, MD 20878, [hereinafter referred to as Assignee], is desirous of securing the entire right, title and interest in and to this invention in all countries throughout the world, and in and to the application for United States Letters Patent on this invention and the Letters Patent to be issued upon this application;

NOW, THEREFORE, be it known that, for good and valuable consideration the receipt of which from assignee, is hereby acknowledged, we, as assignors, have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto the assignee, its lawful successors and assigns, our entire right, title and interest in and to this invention and this application, and all divisions, and continuations thereof, and all Letters Patent of the United States which may be granted thereon, and all reissues thereof, and all rights to claim priority on the basis of such application, and all applications for Letters patent which may hereafter be filed for this invention in any foreign country and all Letters Patent which may be granted on this invention in any foreign country, and all extensions, renewals and reissues thereof; and we hereby authorize and request the Commissioner of Patents and Trademarks of the United States and any official of any foreign country whose duty it is to issue patents on applications as described above, to issue all Letters Patent for this invention to assignee, its successors and assigns, in accordance with the terms of this Assignment;

AND, we HEREBY covenant that we have the full right to convey the interest assigned by this Assignment, and we have not executed and will not execute any agreement in conflict with this Assignment;

AND we HEREBY further covenant and agree that we will, without further consideration, communicate with assignee, its successors and assigns, any facts known to us respecting this invention, and testify in any legal proceeding, sign all lawful papers when called upon to do so, execute and deliver any and all papers that may be necessary or desirable to perfect the title to this invention in said assignee, its successors or assigns, execute all divisional, continuation, and reissue applications, make all rightful oaths and generally do everything possible to aid assignee, its successors and assigns, to obtain and enforce proper patent protection for this invention in the United States and any foreign country, it being understood that any expense incident to the execution of such papers shall be borne by assignees, its successors and assigns.

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FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL S	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: <u>Partha Chowdhury</u> DATE: <u>03.08.2012</u>				

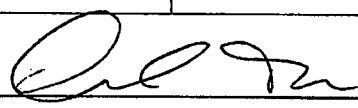
FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

1

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE:  DATE: 3/2/12				

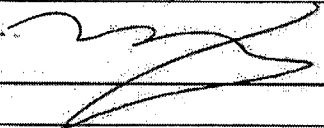
FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

8

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE:  DATE: 3/12/2012				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

Atty Docket No. HER3-100P1
Sole/Joint Invention
(Worldwide Rights)

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune, LLC One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: <u>Philipp Steiner</u> DATE: <u>MARCH 1, 2012</u>				

VERIFICATION

STATE OF NEW YORK)
) ss:
COUNTY OF NEW YORK)

I verify that the attached document identified as:

Assignment

is a copy of the document as executed on September 10, 2012 by Philipp Steiner, on September 12, 2012 by Partha S. Chowdhury, on September 17, 2012 by David Tice and on September 18, 2012 by Zhan Xiao, to **MEDIMMUNE, LLC** of United States and corresponding foreign rights in connection with U.S. Serial No. 61/656,670 filed June 7, 2012.


John Wolfe

Subscribed and sworn to before me this 9th day of
July, 2014.


Notary Public

AMY LEWIS
Notary Public, State of New York
No. 01LE6180070
Qualified in Kings County
Certificate Filed in New York County
Commission Expires Jan. 7, 2016

ASSIGNMENT

WHEREAS We, the below named inventors [hereinafter referred to as Assignors], have made an invention entitled:

Binding Molecules Specific for HER3 and Uses Thereof

for which an application for United States Letters Patent is filed herewith or an application for United States Letters Patent was filed as application number 61/656,670 on June 07, 2012;

AND WHEREAS, MEDIMMUNE, LLC, a limited liability company formed under the laws of Delaware, whose post office address is One MedImmune Way, Gaithersburg, MD 20878, [hereinafter referred to as Assignee], is desirous of securing the entire right, title and interest in and to this invention in all countries throughout the world, and in and to the application for United States Letters Patent on this invention and the Letters Patent to be issued upon this application;

NOW, THEREFORE, be it known that, for good and valuable consideration the receipt of which from assignee, is hereby acknowledged, we, as assignors, have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto the assignee, its lawful successors and assigns, our entire right, title and interest in and to this invention and this application, and all divisions, and continuations thereof, and all Letters Patent of the United States which may be granted thereon, and all reissues thereof, and all rights to claim priority on the basis of such application, and all applications for Letters patent which may hereafter be filed for this invention in any foreign country and all Letters Patent which may be granted on this invention in any foreign country, and all extensions, renewals and reissues thereof; and we hereby authorize and request the Commissioner of Patents and Trademarks of the United States and any official of any foreign country whose duty it is to issue patents on applications as described above, to issue all Letters Patent for this invention to assignee, its successors and assigns, in accordance with the terms of this Assignment;

AND, we HEREBY covenant that we have the full right to convey the interest assigned by this Assignment, and we have not executed and will not execute any agreement in conflict with this Assignment;

AND we HEREBY further covenant and agree that we will, without further consideration, communicate with assignee, its successors and assigns, any facts known to us respecting this invention, and testify in any legal proceeding, sign all lawful papers when called upon to do so, execute and deliver any and all papers that may be necessary or desirable to perfect the title to this invention in said assignee, its successors or assigns, execute all divisional, continuation, and reissue applications, make all rightful oaths and generally do everything possible to aid assignee, its successors and assigns, to obtain and enforce proper patent protection for this invention in the United States and any foreign country, it being understood that any expense incident to the execution of such papers shall be borne by assignees, its successors and assigns.

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Atty Docket No. HER3-100P2
Sole/Joint Invention
(Worldwide Rights)

Patent

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL S.	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: <u>Partha Chowdhury</u> DATE: <u>09-12-12</u>				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

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Atty Docket No. HER3-100P2
Sole/Joint Invention
(Worldwide Rights)

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE:  DATE: <u>9-17-12</u>				

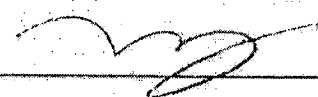
FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

Atty Docket No. HER3-100P2
Sole/Joint Invention
(Worldwide Rights)

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE:  DATE: 9/18/2012				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

Atty Docket No. HER3-100P2
Sole/Joint Invention
(Worldwide Rights)

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FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: <u>Philipp Steiner</u> DATE: <u>SEPT 10, 2012</u>				

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COUNTY OF NEW YORK)

I verify that the attached document identified as:

Assignment

is a copy of the document as executed on November 6, 2012 by Zhan Xiao, November 7, 2012 by Partha S. Chowdhury and David Tice, on November 8, 2012 by Krista Kinneer and on November 12, 2012 by Philipp Steiner, to **MEDIMMUNE, LLC** of United States and corresponding foreign rights in connection with U.S. Serial No. 61/722,558 filed November 5, 2012.

John Wolfe

Subscribed and sworn to before me this 9th day of
July, 2014.

Notary ~~Public~~

AMY LEWIS
Notary Public, State of New York
No. 01LE6180070
Qualified in Kings County
Certificate Filed in New York County
Commission Expires Jan. 7, 2016

ASSIGNMENT

WHEREAS We, the below named inventors [hereinafter referred to as Assignors], have made an invention entitled:

BINDING MOLECULES SPECIFIC FOR HER3 AND USES THEREOF

for which a United States provisional application was filed as provisional patent application number 61/722,558 on November 5, 2012;

AND WHEREAS, **MEDIMMUNE, LLC**, a limited liability company formed under the laws of Delaware, whose post office address is One MedImmune Way, Gaithersburg, MD 20878, [hereinafter referred to as Assignee], is desirous of securing the entire right, title and interest in and to this invention in all countries throughout the world, and in and to the application for United States Letters Patent on this invention and the Letters Patent to be issued upon this application;

NOW, THEREFORE, be it known that, for good and valuable consideration the receipt of which from assignee, is hereby acknowledged, we, as assignors, have sold, assigned, transferred, and set over, and do hereby sell, assign, transfer, and set over unto the assignee, its lawful successors and assigns, our entire right, title and interest in and to this invention and this application, and all divisions, and continuations thereof, and all Letters Patent of the United States which may be granted thereon, and all reissues thereof, and all rights to claim priority on the basis of such application, and all applications for Letters patent which may hereafter be filed for this invention in any foreign country and all Letters Patent which may be granted on this invention in any foreign country, and all extensions, renewals and reissues thereof; and we hereby authorize and request the Commissioner of Patents and Trademarks of the United States and any official of any foreign country whose duty it is to issue patents on applications as described above, to issue all Letters Patent for this invention to assignee, its successors and assigns, in accordance with the terms of this Assignment;

AND, we HEREBY covenant that we have the full right to convey the interest assigned by this Assignment, and we have not executed and will not execute any agreement in conflict with this Assignment;

AND we HEREBY further covenant and agree that we will, without further consideration, communicate with assignee, its successors and assigns, any facts known to us respecting this invention, and testify in any legal proceeding, sign all lawful papers when called upon to do so, execute and deliver any and all papers that may be necessary or desirable to perfect the title to this invention in said assignee, its successors or assigns, execute all divisional, continuation, and reissue applications, make all rightful oaths and generally do everything possible to aid assignee, its successors and assigns, to obtain and

18

enforce proper patent protection for this invention in the United States and any foreign country, it being understood that any expense incident to the execution of such papers shall be borne by assignees, its successors and assigns.

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL S.	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: <u>Partha S. Chowdhury</u> DATE: <u>11-07-12</u>				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

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Atty Docket No. HER3-100P3
Sole/Joint Invention
(Worldwide Rights)

enforce proper patent protection for this invention in the United States and any foreign country, it being understood that any expense incident to the execution of such papers shall be borne by assignees, it successors and assigns.

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL S.	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE:  DATE: 11-7-12				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

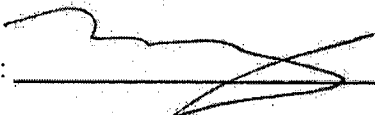
FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

JP

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FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL S.	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE:  DATE: 11/06/2012				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

Atty Docket No. **HER3-100P3**
Sole/Joint Invention
(Worldwide Rights)

enforce proper patent protection for this invention in the United States and any foreign country, it being understood that any expense incident to the execution of such papers shall be borne by assignees, its successors and assigns.

FULL NAME OF INVENTOR	FIRST NAME Partha	MIDDLE INITIAL S.	LAST NAME Chowdhury	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME David	MIDDLE INITIAL	LAST NAME Tice	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Zhan	MIDDLE INITIAL	LAST NAME Xiao	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Philipp	MIDDLE INITIAL	LAST NAME Steiner	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE:  DATE: 12 NOV 2012				

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Atty Docket No. HER3-100P3
Sole/Joint Invention
(Worldwide Rights)

FULL NAME OF INVENTOR	FIRST NAME Krista	MIDDLE INITIAL	LAST NAME Kinneer	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: <u>Krista Kinneer</u> DATE: <u>11/8/12</u>				

FULL NAME OF INVENTOR	FIRST NAME Marlon	MIDDLE INITIAL	LAST NAME Rebelatto	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

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Atty Docket No. HER3-100P3
Sole/Joint Invention
(Worldwide Rights)

FULL NAME OF INVENTOR	FIRST NAME Krista	MIDDLE INITIAL	LAST NAME Kinneer	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: _____ DATE: _____				

FULL NAME OF INVENTOR	FIRST NAME Marlon	MIDDLE INITIAL <i>Mr</i> 11/8/12	LAST NAME Rebelatto	
ADDRESS	Street Address c/o MedImmune One MedImmune Way	City Gaithersburg	State or Country MD	Zip Code 20878
INVENTOR'S SIGNATURE: <i>Marlon Rebelatto</i> DATE: 11/8/12				

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SUPERINTENDENCIA DE INDUSTRIA Y COMERCIO



No. 14-121983- -00001-0000

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Act. 329 CTOINFORMACION Folios: 2

Señores

DIRECCION DE NUEVAS CREACIONES

SUPERINTENDENCIA DE INDUSTRIA Y COMERCIO

Bogotá, D.C.

Re.: Expediente No. 14.121.983

Fase Nacional de Solicitud

de Patente PCT

MEDIMMUNE, LLC

En relación con el Expediente de la referencia y en relación con la solicitud de patente presentada el 06 de Junio del 2014, por medio del presente escrito me permito manifestarle:

1. Acompaño CD con información técnica en formato PDF.

Le solicito se sirva agregar este escrito y su anexo al expediente y continuar el trámite de la solicitud.

De Ustedes Atentamente.

LUIS FELIPE CASTILLO GIBSONE

C.C. No. 79.397.879 de Bogotá

T.P. No. 68.995 C.S.J.