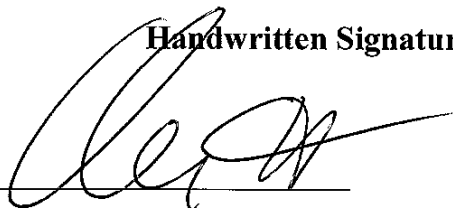


**Revocation of Attorney/Domestic Representative and/or Appointment of
Attorney/Domestic Representative**

Handwritten Signature

Signature Section:

Signature: _____



Date: 14.09.2015

Signatory's Name: Dr. Wolfgang Luderschmidt

Signatory's Position: Patent attorney

Signatory's Phone Number: 0049 831 23291

NOTE TO APPLICANT: When filed as part of the electronic form (i.e., scanned and attached as an image file), include only the signature page (no declaration is required, nor should any other information from the actual revocation be included).