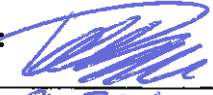


## Revocation of Attorney/Domestic Representative and/or Appointment of Attorney/Domestic Representative

### Handwritten Signature

**Signature Section:**   
Signature: \_\_\_\_\_  
Date: NOV. 9, 2016  
Signatory's Name: Mr. Greg Plaskon  
Signatory's Position: Vice President, Intellectual Property Howmedica Osteonics Corp.  
Signatory's Phone Number: 201-831-5744

**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).