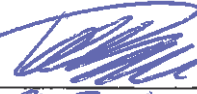


Revocation of Attorney/Domestic Representative and/or Appointment of Attorney/Domestic Representative

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).

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