


Form PTO-1595 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002)	<b>RECORDATION FORM COVER SHEET</b> <b>PATENTS ONLY</b>	U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.		
1. Name of conveying party(ies): Hartmut Derendorf Markus Mueller  Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies)  Name: <u>University of Florida</u>  Internal Address: _____  Street Address: <u>223 Grinter Hall</u>  City: <u>Gainesville</u> State: <u>FL</u> Zip: <u>32611</u>  Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Nature of conveyance:  <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____  Execution Date: <u>06/27/02; 07/15/02, respectively</u>	4. Application number(s) or patent number(s):  If this document is being filed together with a new application, the execution date of the application is: _____  A. Patent Application No.(s) <u>10/177,011; Filed 06/21/02</u>  B. Patent No.(s) _____  Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Name and address of party to whom correspondence concerning document should be mailed:  Name: <u>Glenn P. Ladwig</u>  Internal Address: <u>Saliwanchik, Lloyd &amp; Saliwanchik</u> <u>A Professional Association</u>  Street Address: <u>2421 N.W. 41<sup>st</sup> Street, Suite A-1</u>  City: <u>Gainesville</u> State: <u>FL</u> Zip: <u>32606</u>	6. Total number of applications and patents involved: <u>1</u>  7. Total fee (37 CFR 3.41) ..... \$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account  8. Deposit account number:  <u>19-0065</u> (Attach duplicate copy of this page if paying by deposit account)	
<b>DO NOT USE THIS SPACE</b>		
9. Statement and signature.  <i>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.</i>  <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <u>Glenn P. Ladwig</u>            Name of Person Signing         </div> <div style="width: 30%; text-align: center;">             Signature         </div> <div style="width: 30%; text-align: right;"> <u>October 16, 2002</u>            Date         </div> </div>		
Total number of pages including cover sheet, attachments, and documents: <u>4</u> Atty Docket No. <u>UF-274X</u>		

Mail documents to be recorded with required cover sheet information to:  
 Commissioner of Patents & Trademarks, Box Assignments  
 Washington, D.C. 20231

Docket No. UF-274X

## ASSIGNMENT

WHEREAS, we, the undersigned, residing at the indicated addresses given below, respectively, have invented certain new and useful improvements in **MICRODIALYSIS PROBES AND METHODS OF USE**, for which an application for United States Letters Patent was

signed by us as dated below.

filed **June 21, 2002**, as Serial No. 10/177,011.

WHEREAS, the UNIVERSITY OF FLORIDA, existing by virtue of the laws of the State of Florida, and having an office at 223 Grinter Hall, Gainesville, Florida 32611, is desirous of acquiring the entire right, title, and interest in and to said invention and in and to any Letters Patent which may be granted therefor in the United States and in any and all foreign countries;

NOW, THEREFORE, in view of our prior employment with the UNIVERSITY OF FLORIDA, and other valuable consideration, we, the undersigned, have sold, assigned, and transferred, and by these presents do sell, assign, and transfer, unto said UNIVERSITY OF FLORIDA, its successors and assigns, the full and exclusive right to the said invention in the United States and its territorial possessions and in all foreign countries and the entire right, title, and interest in and to any and all Letters Patent which may be granted therefor in the United States and its territorial possessions and in any and all foreign countries and in and to any and all divisions, reissues, continuations, and extensions thereof.

We hereby authorize and request the Patent Office Officials in the United States and in any and all foreign countries to issue any and all of said Letters Patent, when granted, to said UNIVERSITY OF FLORIDA, as the assignee of the entire right, title, and interest in and to the same, for the sole use and behoof of said UNIVERSITY OF FLORIDA, its successors and assigns.

FURTHER, We agree that we will communicate to said UNIVERSITY OF FLORIDA, or its representatives, any facts known to us respecting said invention; testify in any legal proceedings; sign all lawful papers; execute all divisional, continuation, substitution, renewal, and reissue applications; execute all necessary assignment papers to cause any and all of said Letters Patent to be issued to said UNIVERSITY OF FLORIDA; make all rightful oaths; and generally do everything possible to aid the said UNIVERSITY OF FLORIDA, its successors and assigns, to obtain and enforce proper protection for said invention in the United States and in any and all foreign countries.

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IN TESTIMONY WHEREOF, I have hereunto set my hand this 27<sup>th</sup> day of June, 2002.

Signed H. Derendorf

Address: Dr. Hartmut Derendorf  
8708 SW 42nd Place  
Gainesville, FL 32610-0494

State of Florida )  
County of Alachua )

On this 27<sup>th</sup> day of June, 2002, personally appeared before me the above-named DR. HARTMUT DERENDORF, to me known to be the person described in the foregoing instrument, who executed the foregoing instrument, each for himself, and acknowledged the same to be his free act and deed in and for the purposes set forth in said instrument.

Vada Taylor  
Notary Public

My Commission Expires:



SEAL

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IN TESTIMONY WHEREOF, I have hereunto set my hand this 15 day of July, 2002.

Signed [Signature]

Address: Dr. Markus Mueller  
Währinger Gürtel 18-20  
1090 Vienna, Austria

Austria )  
          )  
City of Vienna )

I, Kostantinos Desenderaf, whose full post office  
(name of witness)  
address is 100494, University of Florida, College of Pharmacy  
Gainesville, FL 32610  
(address of witness)

hereby declare that I was personally present and did see the above-named person, personally known to me to be the person named in the assignment, duly sign and execute the same.

Date: 7/15/02

[Signature]  
(signature of witness)