FORM PTO-1595 RECORDATIC	03-25-2004 s. DEPARTMENT OF COMMERCE
(Rev. 10/02)	Patent and Trademark Office
OMB No. 0651-0027 (exp. 6/30/2003)	
ATTORNEY DOCKET NO. 13610.4002 To the Hon. Commissioner of Patents & Trademarks: Pleas	102703989
 Name of conveying party(ies): 	2. Name and address of receiving party(ies)
University of Naples 3_23.64	Name <u>Antonio Calignano</u>
Federico II Naples, Italy	Internal Address: <u>Universita degli Studi de Napoli, Facolta</u> di Farmacia, Dipartimanto di Farmacologia Sperimentale,
Additional name(s) of conveying party(ies) attached? 🗍 Yes 🖾 No	Street Address:_via Domenico Montesano 49
3. Nature of conveyance:	City: 80129 Naples, ITALY
Assignment 🗌 Merger	NameGiovanna LaRana
Security Agreement Change of Name	Internal Address: <u>Universita degli Studi de Napoli, Facolta</u> di Farmacia, Dipartimanto di Farmacologia Sperimentale,
[_] Other	Street Address:_via Domenico Montesano 49
Execution Date: <u>April 9, 2003</u>	City: 80122 Naples, ITALY
4. Application number(s) or patent number(s): 6,348,498	Additional name(s) and address(es) attached? Yes No
If this document is being filed together with a new appl	ication, the execution date of the application is:
	and the second se
A. Patent Application No.(s)	B. Patent No.(s)
 A. Patent Application No.(s) Additional numbers attach 5. Name and address of party to whom correspondence concerning document should be mailed: 	
Additional numbers attach 5. Name and address of party to whom correspondence concerning document should be mailed:	ed? Yes No 6. Total number of applications and patents involved: 1
Additional numbers attach 5. Name and address of party to whom correspondence	ed? □ Yes ⊠ No
Additional numbers attach 5. Name and address of party to whom correspondence concerning document should be mailed: Name_Orrick, Herrington & Sutcliffe LLP	ed? Yes No 6. Total number of applications and patients involved: 1 7. Total fee (37 CFR 3.41)\$40.00
Additional numbers attach 5. Name and address of party to whom correspondence concerning document should be mailed: Name_Orrick, Herrington & Sutcliffe LLP Internal Address: Street Address: 4 Park Plaza, Suite 1600 City: Irvine State CA ZIP 92604	ed? ☐ Yes ⊠ No 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41)\$40.00 ☐Enclosed
Additional numbers attach 5. Name and address of party to whom correspondence concerning document should be mailed: Name_Orrick, Herrington & Sutcliffe LLP Internal Address: Street Address: <u>4 Park Plaza, Suite 1600</u>	ed? ☐ Yes ⊠ No 6. Total number of applications and patients involved: 1 7. Total fee (37 CFR 3.41)\$40.00 ☐Enclosed ☑ Authorized to be charged to deposit account
Additional numbers attach 5. Name and address of party to whom correspondence concerning document should be mailed: Name_Orrick, Herrington & Sutcliffe LLP Internal Address: Street Address: 4 Park Plaza, Suite 1600 City: Irvine State CA ZIP 92604 Attn: 24/2004 6T0H11 00000112 150665	ed? Yes No 6. Total number of applications and patients involved: 1 7. Total fee (37 CFR 3.41)
Additional numbers attach 5. Name and address of party to whom correspondence concerning document should be mailed: Name_Orrick, Herrington & Sutcliffe LLP Internal Address: Street Address: 4 Park Plaza, Suite 1600 City: Irvine State CA ZIP 92604 Attn: DO NOT US 9. Statement and signature.	ed? Yes No 6. Total number of applications and patients involved: 1 7. Total fee (37 CFR 3.41)\$40.00 □Enclosed ☑ Authorized to be charged to deposit account 8. Deposit Account number: 15-0665
Additional numbers attach 5. Name and address of party to whom correspondence concerning document should be mailed: Name_Orrick, Herrington & Sutcliffe LLP Internal Address: Street Address: Street Address: 4 Park Plaza, Suite 1600 City: Irvine State CA ZIP 92604 Statement and signature. To the best of my knowledge and belief, the forego	ed? ☐ Yes ⊠ No 6. Total number of applications and patents involved: 1 7. Total fee (37 CFR 3.41)\$40.00 ☐Enclosed ☑ Authorized to be charged to deposit account 8. Deposit Account number: <u>15-0665</u> (Attach duplicate copy of this page if paying by deposit account) SE THIS SPACE

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UNIVERSITÀ DEGLI STUDI DI NAPOLI FEDERICO II

DIP. DI FARMACOLOGIA SPERIMENTALE



Invention: "Control of Pain with endogenous cannabinoids" – Inventors: Antonio Calignano, Giovanna La Rana

According to the deliberations of the Board of Directors of the University of Naples Federico II no. 27 dated 7.24.2002 and no. 23 dated 2.25.2003, the University of Naples Federico II – Italy Naples, Corso Umberto I, in person of the Magnificent Rector and legal representative pro-tempore Prof. Guido Trombetti, hereby states that it has assigned to ANTONIO CALIGNANO and GIOVANNA LA RANA, with an act subject to payment on April 3 2003, the right to submit an application for a patent and all property rights arising from the invention titled CONTROL OF PAIN WITH ENDOGENOUS CANNABINOIDS, renouncing to submit a normal application for a patent in Italy and being understood that it provides no guarantees on the patentability of the invention and the validity of the patents eventually granted.

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Naples, 9 APR. 2003

I, the undersigned dr. Maria Luigia Liguori, Administrative Director of the University of Naples Federico II, certify that the signature made in my presence by Prof. Guido Trombetti, Magnificent Rector of the University of Naples Federico II, born in Naples on 4.4.1949 and personally known to me, is true and authentic.

versity of Naples Federico II Administrative Director Dr. Maria Luigia Liguori

πν οι

Rector Prof. Guido Trombetti

bs Federico D

Trasferimentol Brevetti/fb

Nod. 1/1

PATENT REEL: 015116 FRAME: 0518

RECORDED: 03/23/2004