PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

EPAS ID: PAT4181916

SUBMISSION TYPE:	NEW ASSIGNMENT			
NATURE OF CONVEYANCE:	ASSIGNMENT			

CONVEYING PARTY DATA

Name	Execution Date
KYLE DOUGLAS ALLEN	11/07/2016
JON PAUL DOBSON	11/04/2016
ELENA GEORGINA YARMOLA	11/01/2016
ZACHARY KAUFMAN	11/14/2016
DAVID P. ARNOLD	10/27/2016

RECEIVING PARTY DATA

Name:	UNIVERSITY OF FLORIDA RESEARCH FOUNDATION, INC.
Street Address:	223 GRINTER HALL
City:	GAINESVILLE
State/Country:	FLORIDA
Postal Code:	32611

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	15236552

CORRESPONDENCE DATA

Fax Number: (770)951-0933

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: 770-933-9500

Email: alicia.howell@thomashorstemeyer.com

CHRISTOPHER B. LINDER **Correspondent Name:**

Address Line 1: 400 INTERSTATE NORTH PARKWAY

SUITE 1500 Address Line 2:

Address Line 4: ATLANTA, GEORGIA 30339

Total Attackments C				
DATE SIGNED:	12/13/2016			
SIGNATURE:	/CBL/			
NAME OF SUBMITTER:	CHRISTOPHER B. LINDER			
ATTORNEY DOCKET NUMBER:	222106-1786			

Total Attachments: 6

PATENT REEL: 040718 FRAME: 0813



PATENT REEL: 040718 FRAME: 0814

DECLARATION AND ASSIGNMENT

As a below-named inventor, I/we hereby declare that I/we believe I/we am/are the original inventor(s) or an original joint inventor of the subject matter which is claimed in the patent application for United States letters patent, entitled, MAGNETIC APPARATUS AND METHODS OF USE," (the "Invention") that

	was	signed	by me/us	on		·			(a	ittached) and	1/or
X	was	filed or	a August	15,	2016,	Serial	No.	15/236,552	(the	"Applicatio	n").

The Application was made or authorized to be made by me, and I/we have reviewed and understand its contents, including the claims.

I/we hereby acknowledge the duty to disclose information that is material to patentability of the Invention in accordance with Title 37, Code of Federal Regulations, § 1.56.

I/we hereby acknowledge that any willful false statement made in this declaration is punishable under 18 U.S.C. 1001 by fine or imprisonment of not more than five (5) years or both.

By virtue of my/our employment, appointment, or affiliation with the University of Florida (the "University") and pursuant to the University Intellectual Property Policy and my Intellectual Property Agreement with the University, I/we have assigned all my/our rights in the Invention to the University or its assignee or designee. I/we hereby acknowledge that the University has designated the University of Florida Research Foundation, Incorporated (the "Foundation") to be the assignee of its entire right, title, and interest in the Invention.

THEREFORE, for valuable consideration, the sufficiency and receipt of which I/we hereby acknowledge, I/we confirm and ratify the sale, assignment, and transfer to the Foundation, its successors and assigns, all my/our rights in the Invention, the Application, and all other patent applications and patents for the Invention which may be applied for or granted, including, all divisional, continuing, substitute, renewal, reissue, reexamination, counterpart, substitute, extension, and all other applications for letters patent which are or have been filed for the Invention in the United States, its territorial possessions, and all foreign countries and in all patents and extensions which may be granted for the Application.

I/We hereby authorize and request patent office officials in the United States and in all foreign countries to issue any patents that are granted for the Application to the Foundation as the assignee of my/our entire right, title, and interest in the patents.

I/We hereby assign to the Foundation, its successors and assigns, all of my/our rights to sue for and recover damages and profits with respect to past infringements or unauthorized uses of any patent that issues on the Application or unpaid royalties with respect to use of any rights in the Application that occurred before the execution of this Assignment.

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I/We agree that, in regard to the Application, I/we will communicate to the Foundation or its representatives any facts that are known to me/us; testify in any legal proceedings; sign all lawful papers; execute all divisional, continuing, substitute, renewal, reissue, and other applications for letters patent; execute all necessary papers; make all rightful oaths; and generally do everything possible to aid the Foundation, its successors and assigns, to obtain and enforce all rights with respect to the Application in the United States, its territorial possessions, and all foreign countries.

Signed:

Name: Kyle Douglas Allen

Address: 1803 SW 1 08th Street, Gainesville, FL 32607

Date: 1//7/16

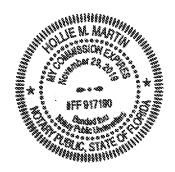
State of Florida County of Alachua

On this 7 day of Now, 2016 Kyle Douglas Allen personally appeared before me, known by me to be the person described in the foregoing Assignment, who executed the foregoing Assignment, and who acknowledged the same to be his/her free act for the purposes set forth in the foregoing Assignment.

Notary Public

My Commission Expires:

SEAL



Parent of Car & On this 41 day of Nover-tod.

The known by me to be the person described in the foregoing Assignment, who executed the foregoing Assignment, who executed the foregoing Assignment, who executed the foregoing Assignment and who asknowledged the same to be his her tree act for the purposes. Action Leaves 10,000 See 40.7 Lane, Gaing eville, 71, 326.08 Continue III day of November Month Public Committee of the Committee set listly in the foregoing Assignment My Commission Expires: SLAI County of Alachua State of Florida

> PATENT REEL: 040718 FRAME: 0817

I/We agree that, in regard to the Application, I/we will communicate to the Foundation or its representatives any facts that are known to me/us; testify in any legal proceedings; sign all lawful papers; execute all divisional, continuing, substitute, renewal, reissue, and other applications for letters patent; execute all necessary papers; make all rightful oaths; and generally do everything possible to aid the Foundation, its successors and assigns, to obtain and enforce all rights with respect to the Application in the United States, its territorial possessions, and all foreign countries.

Signed:

Name: Elena Georgina Yarmola Address: 3012 NW 25th Terrace, Gainesville, FL 32605

Date: __//0//20/6

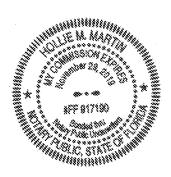
State of Florida County of Alachua

On this day of Novery of 2016 Elena Georgina Yarmola personally appeared before me, known by me to be the person described in the foregoing Assignment, who executed the foregoing Assignment, and who acknowledged the same to be his/her free act for the purposes set forth in the foregoing Assignment.

My Commission Expires:

SEAL

4826-1795-8459, v. 1



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I/We agree that, in regard to the Application, I/we will communicate to the Foundation or its representatives any facts that are known to me/us; testify in any legal proceedings; sign all lawful papers; execute all divisional, continuing, substitute, renewal, reissue, and other applications for letters patent; execute all necessary papers; make all rightful oaths; and generally do everything possible to aid the Foundation, its successors and assigns, to obtain and enforce all rights with respect to the Application in the United States, its territorial possessions, and all foreign countries.

Name: Zachary Kaufman

Address: 10032 NW 13th Court, Plantation, FL 33322- 5616 5 1° St. X7, Awh. TX 78745 Y

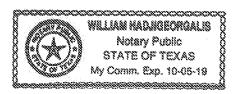
Date: <u>\\/</u>(4/2016

State of Florida Texas County of Alachua Traurz

On this 14th day of November, 2016 Zachary Kaufman personally appeared before me, known by me to be the person described in the foregoing Assignment, who executed the foregoing Assignment, and who acknowledged the same to be his/her free act for the purposes set forth in the foregoing Assignment.

My Commission Expires: SEAL

4826-1795-8459, v. 1



I/We agree that, in regard to the Application, I/we will communicate to the Foundation or its representatives any facts that are known to me/us; testify in any legal proceedings; sign all lawful papers; execute all divisional, continuing, substitute, renewal, reissue, and other applications for letters patent; execute all necessary papers; make all rightful oaths; and generally do everything possible to aid the Foundation, its successors and assigns, to obtain and enforce all rights with respect to the Application in the United States, its territorial possessions, and all foreign countries.

Signed:

Name: David P. Arnold

8577 S.W. 10th Road, Gainesville, FL 32607

10/27/2016

State of Florida

County of Alachua

On this 27 day of October, 2016 David P. Arnold personally appeared before me, known by me to be the person described in the foregoing Assignment, who executed the foregoing Assignment, and who acknowledged the same to be his/her free act for the purposes set forth in the foregoing Assignment.

Notary Public

My Commission Expires: SEAL

4826-1795-8459, v. 1

RECORDED: 12/13/2016

