

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT4663987

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ASSIGNMENT
CONVEYING PARTY DATA	
Name	Execution Date
THOMAS ETTOR ANGELINI	12/20/2016
BRENT S. SUMERLIN	03/14/2017
CHRISTOPHER S. O'BRYAN	12/20/2016
WALLACE GREGORY SAWYER	12/20/2016
TAPOMOY BHATTACHARJEE	12/20/2016
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:	13693389
CORRESPONDENCE DATA	
Fax Number:	(770)951-0933
<i>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.</i>	
Phone:	770-933-9500
Email:	alicia.howell@thomashorstemeyer.com
Correspondent Name:	CHRISTOPHER B. LINDER
Address Line 1:	3200 WINDY HILL RD
Address Line 2:	SUITE 1600E
Address Line 4:	ATLANTA, GEORGIA 30339
ATTORNEY DOCKET NUMBER:	222109-1410
NAME OF SUBMITTER:	CHRISTOPHER B. LINDER
SIGNATURE:	/CBL/
DATE SIGNED:	10/30/2017
This document serves as an Oath/Declaration (37 CFR 1.63).	

Total Attachments: 7

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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, "ORGANIC MICROGEL SYSTEM FOR 3D PRINTING OF SILICONE STRUCTURES," (the "Invention") that

☐ was signed by me/us on _____ (attached) and/or

☒ was filed on September 1, 2016, Serial No. 62/382,652;

(the "Application").

The Application was made or authorized to be made by me/us, 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/our 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"), having an office at 223 Grinter Hall, Gainesville, Florida 32611, 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 application 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.

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 application 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.

Date 12/20/16

Inventor: Thomas Ettore Angelini
Address: 2021 NW 27th Drive
Gainesville, Florida 32605
Citizenship: US

STATE/Commonwealth of Florida
COUNTY OF Alachua:

On this 20 day of December, 2016, before me, the undersigned notary public,
personally appeared Thomas Ettore Angelini, proved to me through satisfactory evidence of
identification, which were personally known to me,
to be the person who signed the preceding or attached document in my presence and swore or affirmed
to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge
and belief and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

SEAL

[Signature]
Notary Public
My commission expires: 2/28/2017



MELANIE N. DePROSPERO
NOTARY PUBLIC
STATE OF FLORIDA
Comm# EE879155
Expires 2/28/2017

Date 3/14/17

Inventor: Brent S. Sumerlin

Address: 2345 NW 14th Place
Gainesville, Florida 32605-5145

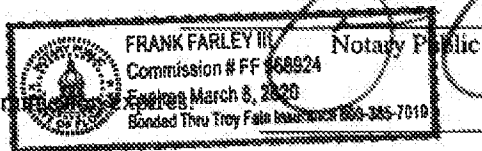
Citizenship: US

STATE/Commonwealth of FLORIDA
COUNTY OF ALACHUA:

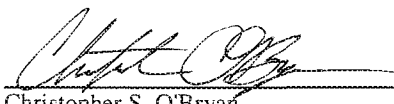
On this 14 day of MARCH, 2017, before me, the undersigned notary public,
personally appeared Brent S. Sumerlin, proved to me through satisfactory evidence of
identification, which were PERSONALLY KNOWN TO NOTARY
to be the person who signed the preceding or attached document in my presence and swore or affirmed
to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge
and belief and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

SEAL

My com



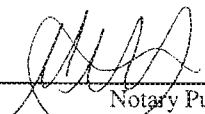
Date 12/20/16

Inventor: 
Address: 3800 SW 34th Street
Apt. HH349
Gainesville, Florida 32608-1489
Citizenship: US

STATE/Commonwealth of Florida
COUNTY OF Alachua:

On this 20 day of December, 2016, before me, the undersigned notary public,
personally appeared Christopher S. O'Bryan, proved to me through satisfactory evidence of
identification, which were personally known to me,
to be the person who signed the preceding or attached document in my presence and swore or affirmed
to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge
and belief and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

SEAL


Notary Public

My commission expires:

2/28/2017



MELANIE N. DePROSPERO
NOTARY PUBLIC
STATE OF FLORIDA
Comm# EE879155
Expires 2/28/2017

12/20/2016

Date

Inventor: W. G Sawyer

Address: 610 NW 89th Street

Gainesville, Florida 32607

Citizenship: US

STATE/Commonwealth of Florida
COUNTY OF Alachua:

On this 20 day of December, 2016, before me, the undersigned notary public,
personally appeared Wallace Gregory Sawyer, proved to me through satisfactory evidence of
identification, which were personally known to me,
to be the person who signed the prededing or attached document in my presence and swore or affirmed
to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge
and belief and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

SEAL

[Signature]
Notary Public
2/28/2017

My commission expires:



MELANIE N. DePROSPERO
NOTARY PUBLIC
STATE OF FLORIDA
Comm# EE879155
Expires 2/28/2017

Date 12/20/16

Inventor: Tapomoy Bhattacharjee
Address: 3515 SW 39th Boulevard, Apt. 8D
Gainesville, Florida 32608-6542
Citizenship: India

STATE/Commonwealth of Florida
County of Alachua:

On this 20 day of December, 2016, before me, the undersigned notary public,
personally appeared Tapomoy Bhattacharjee, proved to me through satisfactory evidence of
identification, which were personally known to me,
to be the person who signed the preceding or attached document in my presence and swore or affirmed
to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge
and belief and acknowledged to me that (he) (she) signed it voluntarily for its stated purpose.

SEAL

[Signature]
Notary Public

My commission expires:

2/28/17



MELANIE N. DePROSPERO
NOTARY PUBLIC
STATE OF FLORIDA
Comm# EE879155
Expires 2/28/2017