

PATENT ASSIGNMENT COVER SHEET

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SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	ASSIGNMENT	
CONVEYING PARTY DATA		
	Name	Execution Date
	ADAM J. KATZ	10/14/2019
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:	16604900	
CORRESPONDENCE DATA		
Fax Number:		
<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:	7709339500	
Email:	elise.petersen@thomashorstemeyer.com	
Correspondent Name:	HEATHER C. GORMAN	
Address Line 1:	3200 WINDY HILL ROAD SE	
Address Line 2:	SUITE 1600E	
Address Line 4:	ATLANTA, GEORGIA 30339	
ATTORNEY DOCKET NUMBER:	T14275 (222107-1750)	
NAME OF SUBMITTER:	HEATHER C. GORMAN	
SIGNATURE:	/HEATHER C. GORMAN/	
DATE SIGNED:	01/07/2020	
Total Attachments: 2		
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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 a claimed invention in the patent application for United States letters patent, entitled, “**SYSTEMS AND METHODS FOR IN-SITU, BOTTOM-UP TISSUE GENERATION**,” (the “Invention”) that

☐ was signed by me/us on _____ (attached) and/or
☒ was filed on October 11, 2019, Serial No. 16/604,900
(the “Application”).

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.

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: Adam J. Katz

Address: ~~3411 SW 92nd Street~~ 4913 SAM MEADOW COURT
~~Gainesville, FL 32608~~ WINSTON SALEM, NC 27104

Date: 10/14/19

State of Florida
County of Alachua

On this 14th day of October, 2019, Adam J. Katz 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.

Paula J. Hall
Notary Public

Paula J. Hall
NOTARY PUBLIC
Forsyth County, NC

My Commission Expires:
SEAL

7-27-22 Paula J. Hall