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05-02-2	2000 EET U.S. DEPARTMENT OF COMMERCE
FORM PTO-1595 (Rev. 6-93)	THE PARTY COLD PARTY.
OMB No 0851-0011 (exp. 4/94)	GD-45
Tab settings -> = == 101340	
To the Honorable Commissioner of Pε	e attached original documents of copy thereof
1. Name of conveying party(ies):	Name and address of receiving party(ies):
Gould Electronics Inc.	GA-TEK Inc. (dba Gould Electronics Inc.)
	Name: GA-TER Inc. (dba Godid Electronics Inc.)
	Ul Internal Address:
1 m m ng 11 m	
Additional name(s) of conveying party(les) attached? Yes X No	
3. Nature of conveyance: 3 · 31·00	
Assignment Merger	Street Address: 34929 Curtis Boulevard
Security Agreement X Change of Name	
Other	City: Eastlake State: OH ZIP: 44095-40-4
Execution Date: January 1, 1998	Additional name(s) & address(es) attached?
4. Application number(s) or patent number(s)	
	the evenution data of the application is:
If this document is being filed together with a new application	
A. Patent Application No.(s)	B. Patent No.(s)
	5041199
	5085952
Additional numbers atta	iched? X Ye No
5. Name and address of party to whom correspondence	6. Total number of applications and patents involved.
concerning document should be mailed:	6. Total humber of approaches and patents involves
Name: Mark Kusner	- 400 00
	7. Total fee (37 CFR 3.41) \$ 400.00
Internal Address: Mark Kusner Co., LPA	☐ Enclosed
	Authorized to be charged to deposit account
Street Address: Highland Place - Suite 310	8. Deposit account number:
6151 Wilson Mills Road	50-0537
City: Highland Heights S:ate: OH ZIP 44143	(Attach duplicate copy of this page if paying by Jeposit accounts
DO NOT	USE THIS SPACE
A. Statement and signature	
9 Statement and signature To the best of my knowledge and belief, the foregoing inform	ration is true and correct and any attached copy is a true copy ωt
the original document	
Mark Kusner, Reg. No. 31,115	A Kum 23 MARTH 2000
Name of Person Signing	Signature Date
1	over sheet, attachments, and document:

05/01/2000 TTON11 00000341 500537 5041199stall documents to be recorded with required cover sheet information to:
Commissioner of Patents & Trademarks, Box Assignments
Washington, D.C. 20231

01 FC:581

400.00 CH

(Form PTO--1595--Recordation Form Cover Sheet - page 1 of 3)

PATENT

REEL: 010731 FRAME: 0474

FORM PTO-1595		N FORM COVER SE		DEPARTMENT OF COMMERC :
(Rev. 6-93)	PA?	TENTS ONL	Y	Patent and Trademark Office
OMB No. 0651-0011 (exp. 4/94)				
1. Name of conveying party	(ies):			The second secon
				
				
Additional name	e(s) of conveying par	ty(ics) attached?	Yes	No X
2. Name and address of rece v	ing party(ies):			
Name:				
Internal Address:			· · · · · · · · · · · · · · · · · · ·	
Street Address:	State:	ZIP:		
Name:				
Internal Address:				
Street Address:	State:	ZIP:		
City: Additional name(s) & address(es) attach		No X	-
4. Application number(s) or pa				
		application, the exect	ution date of the ap	pplication is:
_	Application No.(s)		B. Patent No.	
			5183715	
-			5089027	
-			5279624	
			5336273	
			- 5397660	

Additional numbers attached?

FORM PTO 1595	RECORDATION FORM COVER SHEET U.S	DEPARTMENT OF COMMERCE
Rev. 6-93)	PATENTS ONLY	Patent and Trademark Office
OMB No. 0651-0011 (exp. 4/94)		
Name of conveying party	y(ies):	
 		
	-	
Additional nam	ne(s) of conveying party(ies) attached? Yes	No X
2. Name and address of recei	vine party(:es):	
a turre unit address of root.	· ····································	
Name:		
Internal Address:		
Street Address:		
City:	State: ZIP:	
Name:		
Street Address:	State: ZIP:	
-		E-1
Additional name(s) & address(es) attached? Yes No	x
4. Application number(s) or p	patent number(s):	
	d together with a new application, the execution date	of the application is:
If this document is being the	together with a new application, the execution date	of the application is.
A. Patem	Application No.(s) B. Pa	itent No.(s)
	564	8186
	503	7207
	583	7397

5792576

No X

Yes 🔲

Additional numbers attached?



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06109-1238

Approved 178797
Date 1778797
Fee 50

Presented by
Bob Taft, Secretary of State
10 East Breed Street, 14th Floor
Columbus, Ohio 43266-0418
Form MER (July 1994)

CERTIFICATE OF MERGER

ER 97121862801

La accordance with the requirements of Chia Lew, the underrigned corporations, limited liability-companies and/or limited partnerships, desiring to affect a merger, set forth the following facts:

SUR	VIVING ENTITY
A.	The name of the entity surviving the merger is:
_Go	uld Fleetronics Inc.
6/4	energ majer o at Chie Leased patrockup or quarfeel foruge Esthal parameters, to important quantur must be provided:
В.	Name change: As a result of this merger, the name of the surviving entity has been changed to the following: GA-TEK Inc.
	and it for every of success to early a constant appendix would be unabled
c.	The surviving entity is a: (Please check the appropriate box and fill in the appropriate blanks)
[x]	Domestic (Ohio) corporation
[}	Foreign (Non-Ohlo) corporation incorporated under the laws of the state/ country of and licensed to transact business in the state of Ohio.
1.1	Foreign (Non-Ohio) corporation incorporated under the laws of the state/country of
[]	Domestic (Offio) limited liability company
[]	Foreign (Non-Ohio) limited liability company organized under the laws of the state/country of, and registered to do business in the state of Ohio.
{ }	Foreign (Non-Ohio) limited liability company organized under the laws of the state/country of, and NOT registered to do business in the state of Ohio.
()	Domestic (Ohio) limited partnership, registration number
	DECLESSE
	ace The

	(1	Foreign (Non-Ohio) is state/country of business in the state of	mited partnership organi f Ohio, under registration	zed under ti , au n number	he laws of the nd registered to do
	l I	=t /blan Objet H	-ied namerchia arasni	ved under ti	
Œ.	Merg	ing Entitles			
each (!		state/country of incorpo hich is a party to the me municipal representation	<i>waer 200 3</i> 5	ganization, respectively, o follows: Wangkin que e en les eus échie rejares emant
Name		State! (Country of Organization	Type of E	alky
		icrosystems Koldin		Co	rporation
til.	The r	er Agreement on File name and mailing address of the agreement of me	s of the person or entity rger upon written reque	from whom	/which eligible persons m
	Nam	•	Address		
GA-	TEK Ir	ے. دور	34929 Curcis Bou	levard	
			(street and number) Fact lake (city, village or towns)	OH nip) (stat	
17.	Effec	tive Date of Merger			
	This	merger is to be effective	:		

On <u>lanuary 1</u>, 1998 (If a date is specified, the date must be a date on ar after the date of filing; the effective date of the merger cannot be earlier than the date of filing; if no date is specified, the date of filing will be the effective date of the merger).



V. Merger Authorized

The laws of the state or country under which each constituent entity exists, permits this

This merger was adopted, approved and authorized by each of the constituent entities in compliance with the laws of the state under which it is organized, and the persons signing this certificate on behalf of each of the constituent entities are duly authorized to do so.

VI. Statutory Agent

The name and address of the surviving entity's statutory agent upon whom any process, notice or demand may be served is:

Name	Address	
	(tambina oven piperen)	
	ter, mines of translate this main	

(This item MUST be completed if the surviving entity is a foreign entity which is not licensed, registered or otherwise authorized to conduct or transact business in the State of Ohlo)

Acceptance of Agent

The undersigned, named herein as the statutory agent for the above referenced surviving entity, hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature of Agent

(The acceptance of agent must be completed by domestic surviving entities if through this merger the statutory agent for the surviving entity has changed, or the named agent differs in any way from the name reflected on the Secretary of State's records.)

VII. Statement of Merger

Upon filing, or upon such later date as specified herein, the merging entity/entities listed herein shall merge into the listed surviving entity.

VIII. Amendments

The articles of incorporation, articles of organization or certificate of limited partnership (strike the inapplicable terms) of the surviving domestic entity herein, are amended as set forth in the attached "Exhibit A"

(Please note that any amendments to articles of Incorporation, articles of organization or to a certificate of limited partnership MUST be attached if the surviving entity is a DOMESTIC corporation, limited liability company, or limited partnership.)

IX. Qualification or Licensure of Foreign Surviving Entity

(neme)		(street and number)
		, Ohio
(city, village or township))	(tip code)
irrevocably consents of the agent continue found, if the corpor agent when required	to service, and tration, to	g foreign corporation, limited liability company or limited partnership ice of process on the statutory agent listed above as long as the authority to service of process upon the Secretary of State if the agent cannot be imited liability company or limited partnership fails to designate another o, or if the corporation's, limited liability company's, or limited stration to do business in Ohio expires or is cancelled.
B. The qual	lifying c	ntity also states as follows: (complete only if applicable)
l.	(If t	eign Qualifying Limited Liability Company the qualifying entity is a foreign limited liability company, the following rmation must be completed)
	1.	The name of the limited liability company in its state of organization/registration is
	ъ.	The name under which the limited liability company desires to transact business in Ohio is
	c.	The limited liability company was organized or registered on under the laws of the state/country of
	d.	The address to which interested persons may direct request for copies of the articles of organization, operating agreement, bylaws, or other

2.	ar th	ign Qualifying Limited Partnersnip e qualifying entity is a foreign limited partnership, the following mation must be completed)
	8.	The name of limited partnership is
	ь.	The limited partnership was formed on
	c.	The address of the office of the limited partnership in its state/country of organization is
	d.	The limited partnership's principal office address is
	c.	The names and business or residence addresses of the GENERAL partners of the partnership are as follows:
		Name Address
		(If insufficient space to cover this tiem, please attach a separate sheet listing the general partners and their respective addresses)
	f.	The address of the office where a list of the names and business or residence addresses of the limited partners and their respective capital contributions is to be maintained is:

The limited partnership hereby certifies that it shall maintain said records until the registration of the limited partnership in Ohlo is cancelled or withdrawn.



The undersigned constituent entities have caused this certificate of merger to be signed by its duly authorized officers, partners and representatives on the date(s) stated below.

Gould Electronics Inc.	American Microsystems Holding Corporation
exact name of emity	exact name of entity
By: Abicheleston	Ву:
its: Senior Vice President, General	lts:
Counsel and Secretary	
	Date:
Date:	
exact name of entity	exact name of entity
Ву:	B <i>y</i> :
lts;	· · · · · · · · · · · · · · · · · · ·
Date:	Date:
exact name of entity	exact name of entity
Ву:	By:
ls:	
Date:	Date:
exact name of entity	exact name of entity
Rv.	By:
By:	lts:
Date:	Date:
exact name of entity	exact name of entity
Ву:	Ву:
lus:	
Date:	Date:

mit van grannt parlam men sign ab behalf af verk aministens benind permentips. If beneffelser score for eigengris, a experts class absold be attended demanding with eigenstress



The undersigned constituent cathles have caused this certificate of merger to be signed by its duly authorized officers, partners and representatives on the date(s) stated below.

Gould Electronics Inc.	American Microsystems Molding Corporation
exact name of entity	exact name of entity
and the land of the are .	By: Lieur Honor Ho
By: Victor C. las projustices General	ral Its: Vice President, Hanufacturing
Counsel and Secretary	Operations
Date:	Date:
eract name of entity	exect name of entity
•	- .
8y:	By:
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	- Comiter
exact name of entity	exact name of entity
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Date:	Date:
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lu:	
Date:	Date:

RECORDED: 03/31/2000