

06-20-2000



101384910

RECORDATION FORM COVER SHEET  
PATENTS ONLY

5/30/00

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

Conveyance Type

- New
- Resubmission (Non-Recordation)  
Document ID#
- Correction of PTO Error  
Reel #  Frame #
- Corrective Document  
Reel #  Frame #

- Assignment
  - License
  - Merger
  - Security Agreement
  - Change of Name
  - Other
- U.S. Government**  
(For Use ONLY by U.S. Government Agencies)
- Departmental File
  - Secret File

Conveying Party(ies)

Mark if additional names of conveying parties attached

Name (line 1)  Execution Date   
Month Day Year

Name (line 2)

**Second Party**

Name (line 1)  Execution Date   
Month Day Year

Name (line 2)

Receiving Party

Mark if additional names of receiving parties attached

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

Name (line 1)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)     
City State/Country Zip Code

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

06/19/2000 ASCOTT 00000192 4779768

01 FC:581 440.00 CH

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0651-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

**Correspondent Name and Address** Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages** Enter the total number of pages of the attached conveyance document including any attachments. #

**Application Number(s) or Patent Number(s)**  Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

Patent Application Number(s)

Patent Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="4779768"/>	<input type="text" value="4589835"/>	<input type="text" value="D299956"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="4813432"/>	<input type="text" value="4903708"/>	<input type="text" value="D303152"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="D303151"/>	<input type="text" value="4563104"/>	<input type="text" value="5073347"/>

If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing inventor. Month Day Year

**Patent Cooperation Treaty (PCT)**  
Enter PCT application number only if a U.S. Application Number has not been assigned.  
PCT  PCT  PCT   
PCT  PCT  PCT

**Number of Properties** Enter the total number of properties involved. #

**Fee Amount** Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed  Deposit Account   
Deposit Account  
(Enter for payment by deposit account or if additional fees can be charged to the account.)  
Deposit Account Number: #   
Authorization to charge additional fees: Yes  No

**Statement and Signature**

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Kelly C. Scott  
Name of Person Signing



Signature

5/24/00  
Date

RECORDATION FORM COVER SHEET  
CONTINUATION  
PATENTS ONLY

Conveying Party(ies)

Mark if additional names of conveying parties attached

Enter additional Conveying Parties

Name (line 1) Beral Enterprises, Inc.

Execution Date  
Month Day Year  
12/19/94

Name (line 2)

Execution Date  
Month Day Year

Name (line 1)

Name (line 2)

Execution Date  
Month Day Year

Name (line 1)

Name (line 2)

Receiving Party(ies)

Mark if additional names of receiving parties attached

Enter additional Receiving Party(ies)

Name (line 1) Samco Scientific, Inc.

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

Name (line 2)

Address (line 1) 1050 Arroyo Avenue

Address (line 2)

Address (line 3) San Fernando California 91340-1822  
City State/Country Zip Code

Name (line 1)

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3) City State/Country Zip Code

Application Number(s) or Patent Number(s)

Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

Patent Application Number(s)

Patent Number(s)


D339868	D333705	

Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF MERGER, WHICH MERGES:

"SAMCO SCIENTIFIC, INC.", A CALIFORNIA CORPORATION,  
WITH AND INTO "BERAL ENTERPRISES, INC." UNDER THE NAME OF  
"SAMCO SCIENTIFIC, INC.", A CORPORATION ORGANIZED AND EXISTING  
UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED  
IN THIS OFFICE THE TWENTY-SECOND DAY OF DECEMBER, A.D. 1994, AT  
9 O'CLOCK A.M.



A handwritten signature in cursive script, reading "Edward J. Freel".

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Edward J. Freel, Secretary of State

2355706 8100M

981439660

AUTHENTICATION:

9407265

DATE:

11-16-98

PATENT

REEL: 010848 FRAME: 0614

CERTIFICATE OF MERGER  
OF  
SAMCO SCIENTIFIC, INC.  
A CALIFORNIA CORPORATION  
INTO  
BERAL ENTERPRISES, INC.  
A DELAWARE CORPORATION

The undersigned corporation DOES HEREBY CERTIFY:

FIRST: That the name and state of incorporation of each of the constituents of the Merger is as follows:

<u>NAME</u>	<u>STATE OF INCORPORATION</u>
Samco Scientific, Inc.	California
Beral Enterprises, Inc.	Delaware

SECOND: That an Agreement of Merger dated as of December 8, 1994 between Samco Scientific, Inc., a California corporation ("Samco"), and Beral Enterprises, Inc., a Delaware corporation, the constituent corporations of the merger, has been approved, adopted, certified, executed and acknowledged by each of the constituent corporations as follows: In the case of Beral Enterprises, Inc., in accordance with the requirements of Subsection (c) of Section 252 of the Delaware Corporation Law of the State of Delaware; and in the case of Samco, in accordance with Section 1201 of the California Corporations Code.

THIRD: That the name of the surviving corporation of the Merger is Beral Enterprises, Inc., a Delaware corporation, which shall herewith be changed to Samco Scientific, Inc., a Delaware corporation.

FOURTH: That the Certificate of Incorporation of Beral Enterprises, Inc., a Delaware corporation which is surviving the merger, shall be the Certificate of Incorporation of the surviving corporation. Article FIRST of such Certificate of Incorporation is hereby amended to read as follows: "FIRST: The name of the Corporation is Samco Scientific, Inc."

FIFTH: That the executed Agreement and Plan of Merger is on file at the principal place of business of the surviving corporation, the address of which is 1050 Arroyo Avenue, San Fernando, California 91340.

SIXTH:

That a copy of the executed Agreement and Plan of Merger will be furnished by the surviving corporation on request and without cost to any stockholder of either constituent corporation.

SEVENTH:

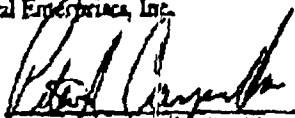
That the authorized capital stock of each foreign [to Delaware] corporation which is a party to the merger is as follows:

<u>Corporation</u>	<u>Class</u>	<u>Authorized</u>
Samco Scientific, Inc. a California corporation	Common	10,000

The undersigned officers of the surviving corporation of the merger do sign this Certificate of Merger pursuant to Section 252(c) of the General Corporation Law of the State of Delaware.

December 19, 1994

Beral Enterprises, Inc.

By:   
Peter F. Campanella, President



  
Denise A. Hauselt, Secretary

DAH:br  
\\samco001r.doc

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FROM CORPORATION TRUST DOVER 302-674-8340