

01-03-2002

ER SHEET

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark OfficeTo the Honorable Assistant Secretary
or copy(ies) thereof.

101931057

marks: Please record the attached original document(s)

1. Name of conveying party(ies):

Jeumont Industrie
1, Place de la Coupole,
92400 Courbevoie, FranceAdditional name(s) of conveying party(ies) attached? No

2. Name and address of receiving party(ies):

Name: Jeumont S. A.
1, Place de la Coupole,
92400 Courbevoie, FranceAdditional name(s) & address(es) attached? No

3. Nature of conveyance:

☐ Assignment ☐ Merger
☐ Security Agreement ☒ Change of Name
☐ Other _____Execution Date: March 21, 2001

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is:

A. Patent Application No.(s)

B. Patent No.(s) Patent No. D 444,569
, issued July 3, 2001Additional numbers attached? No5. Name and address of party to whom correspondence
concerning document should be mailed:Name: WENDEROTH, LIND & PONACK, L.L.P.
Attn: Charles R. Watts, Esq.Street Address: 2033 K Street, N.W., Suite 800City: Washington, State: DC ZIP: 20006-10216. Total number of applications and patents involved: 17. Total fee (37 CFR 3.41). \$40.00☒ Enclosed (Check No. 48134)
Authorized to be charged to deposit account8. Deposit account number: 23-0975

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. 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.*Charles R. Watts, Reg. No. 33,142
Name of Person Signing

Signature

December 27, 2001
DateTotal number of pages including cover sheet: 11

OMB No. 0651-0011 (exp. 4/94)

Do not detach this portion

01/02/2002 DBYRNE 00000081 D444569

01 FC:581

40.00 DP

Mail documents to be recorded with required cover sheet information:

Commissioner and Assistant Secretary of Patents and Trademarks
Box Assignments
Washington, D.C. 20231THE COMMISSIONER IS AUTHORIZED
TO OFFER A VOLUNTARY EFFICIENCY IN THE
FUTURE FOR THE DEPOSIT
ACCOUNT NO. 23-0975

Public burden reporting for this sample cover sheet is estimated to average about 30 minutes per document to be recorded, including time for reviewing the document and gathering the data needed, and completing and reviewing the sample cover sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Office of Information Systems, PK2-1000C, Washington, D.C. 20231, and the Office of Management and Budget, Paperwork Reduction Project (0651-0011), Washington, D.C. 20503.

CERTIFICATE

I, Mauricette VALAT, trademark attorney of Cabinet LAVOIX, 2 Place d'Estienne d'Orves 75009 Paris (FRANCE), certify that I am conversant with the English and French languages and that the annexed document in the English language is a translation prepared by me of the certified copy of the French Trade and Companies Register evidencing the change of name of JEUMONT INDUSTRIE to JEUMONT S.A and is true to the best of my knowledge and belief.

Done in Paris, December 3, 2001.



M. VALAT

OF :

CLERK'S OFFICE CODE :

89B 3613

TRADE AND COMPANIES REGISTER

REGISTRATION

☐ MAIN
☐ SECONDARY

☐ ADDITIONAL
☒ MODIFYING

☐ CORRECTION
☐ REMOVAL

Date of arrival at the Clerk's Office :

Number of arrival at the Clerk's Office : **10838**

NOTE : The Clerks and the National Institute of Industrial Property are obliged and sole authorised to issue to any person who requests it, certificates, copies or extracts from registrations made to the register and documents filed in appendix, except with regard to registrations which have been removed, notified in the condition fixed by the order (of September 24, 1984), provided for in article 88 (order n° 84-406 of May 30, 1994, art. 67).

JUSTIFYING DOCUMENTS :

REGULATED ACTIVITIES (item n° 24) :

DATE OF FILING OF THE STATUS :

CLERK'S OBSERVATIONS :

The conformity of the attached declarations with the justifying documents produced in application of regulations has been checked by the Clerk of the Court who has accordingly made the above registration.

DATE OF THE RECORDAL : MARCH 21, 2001

Certified by the Clerk of the Court

(seal)

Side reserved for the
National Trade and
Companies Register

MODIFICATION STATEMENT		ENTITY
M2 n° 90-0195 CERFA, Statement submitted to CFE on MARCH 16, 2001 Reserved to the competent CFE	- of the COMPANY : ☒ IDENTIFICATION ☐ CHARACTERISTICS ☐ OFFICERS ☒ TRANSFER OF HEADOFFICE ☐ WINDING UP ☐ - of the ESTABLISHMENT : OPENING ☐ IDENTIFICATION ☐ OFFICERS ☐ ACTIVITIES ☐ CLOSING ☐ - Other modifications (to precise if needed) :	G9251 782214 0 Attached legal documents Attached insert
PRINCIPAL REGISTRATION NUMBER(S) RCS NANTERRE 341 805 836 Trade and Companies Register SIREN WHATEVER THE FORMALITY, HEADINGS ON A RED BACKGROUND MUST BE FILLED UP AND IF THE MODIFICATION CONCERNS AN ESTABLISHMENT, HEADINGS ON A BLACK BACKGROUND MUST ALSO BE FILLED UP PRIOR IDENTIFICATION in case of modification : DENOMINATION : JEUMONT INDUSTRIE - JI		
IDENTIFICATION / and if needed new identification on : March 5, 2001 DENOMINATION : JEUMONT S.A.		ACRONYM : ACRONYM :
HEADOFFICE (or in case of transfer, new headoffice) : ADDRESS, including if needed the PAYING AGENT IDENTITY (name, forenames or denomination) : TOUR FRAMATOME – 1 PLACE DE LA COUPOLE – 92400 COURBEVOIE		
SIRET No. : LEGAL FORM : société anonyme (joint stock company) (and particular status if needed) MAIN ACTIVITIES OF THE COMPANY : All operations relating to studies and industrial, commercial and financial realisations. WORKFORCE of the company :		Modification date Modification date Modification date
TRADE NAME : CAPITAL amount : Legal Entity's duration years ; or in case of company submitted to a yearly advertising of its accounts, CLOSING DATE of the legal exercise : day, month		NEW ☐
FF or currency or, if variable capital, minimum amount FF or currency FF or in case of company submitted to a yearly advertising of its accounts, CLOSING DATE of the legal exercise : day, month		LEAVING ☐
For the under described establishment, if needed, person(s) empowered to sign on behalf of the company (AUTHORIZED REPRESENTATIVE(S)), OWNERS. - OFFICERS and if needed, DIRECTORS, AUDITORS and PARTNERS indefinitely and jointly obliged to legal duties, MEMBERS of the GIE, LIQUIDATORS.		MAINTAINED BUT MODIFIED ☐
NAME Forenames DENOMINATION RESIDENCE HEADOFFICE ADDRESS Prior title (if needed) :	date of birth dept	Citizenship
NAME Forenames DENOMINATION RESIDENCE HEADOFFICE ADDRESS Prior title (if needed) Director	date of birth dept	Citizenship
NAME Forenames DENOMINATION RESIDENCE HEADOFFICE ADDRESS Prior title (if needed)	date of birth dept	Citizenship
List to follow on inserts YES ☐ NO ☐ In case of DISSOLUTION : the Company pursues its exploitation for the liquidation needs : YES ☐ NO ☐ precise the frame OFFICERS the LIQUIDATOR(S) references Indicate the title and the date of the legal announcements paper having published the liquidator(s) nomination : In case of HEADOFFICE TRANSFER falling with the competence of another Court, indicate the clerk's offices where are eventually subscribed the secondary registrations : List to follow on insert(s) YES ☐ NO ☐ In case of MODIFICATION of the CAPITAL pursuant to a MERGER ☐ or a division ☐ legal Entities having taking part in the operation (Denomination, Legal Form, Head Office address, RCS No.) List to follow on insert(s) YES ☐ NO ☐		

IF THE FORMALITY CONCERNS AN ESTABLISSEMENT, HEADINGS ON A **BLACK BACKGROUND** MUST COMPULSORY BE FILED

CONCERNED ESTABLISHMENT / and if needed NEW IDENTIFICATION on : ADDRESS : - if different from those of the headoffice (PRINCIPAL ESTABLISHMENT if it is integrated in the Head office) - in case of transfer, new address	PRIOR ESTABLISHMENT in case of transfer PRIOR ADDRESS WORDING if change by decision of the local council ADDRESS : In case of TRANSFER of the HEADOFFICE or of the ESTABLISHMENT, SIRET No. : _____ If employment cease of any salaried, date : _____ Maintain of an activity at the prior headoffice : YES () NO ()			
Head office SIRET No. : _____ This establishment is (for the company) : new () modified () cancelled () Categories : head office () main establishment () secondary establishment () Sign : _____	ANALYSIS OF THE OPERATED MODIFICATION In case of OPENING of the establishment, of MODIFICATION of EXPLOITATION MODE, of ADJUNCTION OF ACTIVITY, precise and ORIGIN : <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"> ☐ creation ☐ transfer of activity ☐ purchase </td> <td style="width: 33%;"> ☐ modification date ☐ merger ☐ recovery after hire ☐ management </td> <td style="width: 33%;"> ☐ take on hire ☐ other (precise) ☐ management </td> </tr> </table> PRIOR EXPLOITANT's identity : (name, forenames or denomination) RCS or SIREN No : _____ If needed, removal or modification date on prior exploitant's RCS (to be filled eventually by the clerk)	☐ creation ☐ transfer of activity ☐ purchase	☐ modification date ☐ merger ☐ recovery after hire ☐ management	☐ take on hire ☐ other (precise) ☐ management
☐ creation ☐ transfer of activity ☐ purchase	☐ modification date ☐ merger ☐ recovery after hire ☐ management	☐ take on hire ☐ other (precise) ☐ management		
In case of CLOSING of the establishment, of EXPLOITATION MODE MODIFICATION, of ACTIVITY SUPPRESSION, precise and DESTINATION : <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"> ☐ removal ☐ activity transfer ☐ sale </td> <td style="width: 33%;"> ☐ modification date ☐ merger ☐ recovery after hire ☐ management by the owner </td> <td style="width: 33%;"> ☐ take on hire ☐ other (precise) ☐ management </td> </tr> </table> BENEFICIARY's identity : Name, forenames, residence or denomination, Headoffice address	☐ removal ☐ activity transfer ☐ sale	☐ modification date ☐ merger ☐ recovery after hire ☐ management by the owner	☐ take on hire ☐ other (precise) ☐ management	In case of ACQUISITION of the BUSINESS (by PURCHASE or MERGER), indicate the title and the date of the legal publications having published the assignment : In case of TAKING ON HIRE MANAGEMENT, indicate the contract duration : from _____ to _____ and if it is renewable by tacit agreement : YES ☐ NO ☐ BUSINESS HIRER OUT's identity : Name, forenames, residence or denomination, headoffice address
☐ removal ☐ activity transfer ☐ sale	☐ modification date ☐ merger ☐ recovery after hire ☐ management by the owner	☐ take on hire ☐ other (precise) ☐ management		
OPERATED ACTIVITIES in this establishment at the formality date : permanent ☐ seasonal ☐ walking ☐ follow to ☐ ☐ of exploitation To fulfill only if this establishment is new or if its activities have been modified beginning modification ending PRINCIPAL ACTIVITY : _____ SECONDARY ACTIVITIES : _____ Eventual observations of the declarant or other modification(s) : _____				
PERMANENT ADDRESS : Head office and for the return of the formalities : J.S.S. 8 rue Saint-Augustin 75080 PARIS CEDEX 02 For correspondence _____ Town _____ zip code _____ road : No. _____ Type _____ wording _____ phone : 01 47 03 10 10				
THE UNDERSIGNED : Agnès BOUDAL Agent our ref. : 137845/A.V Patronymic name, usual name, forenames – in case of attorney, precise also its titles and address INSCRIPTION request to RCS ☐ RM ☐ RSAC ☐ REBA ☐ CANCELLATION WITH RCS ☐ RM ☐ RSAC ☐ REBA ☐ An., statement to fiscal services, to social guarantee organisms, to INSEE, and if he is or ceases to be an employer, to Work Inspection and to ASSEDIC Done in : _____ on : _____ signature : _____				

New (or MAINTAINED) in case of headoffice transfer in another clerk's office or another Chamber of Trade) precise :

OF :

89B 3613

CLERK'S OFFICE CODE :

TRADE AND COMPANIES REGISTER

REGISTRATION	☐ MAIN	☐ ADDITIONAL	☐ CORRECTION
	☐ SECONDARY	☒ MODIFYING	☐ REMOVAL

Date of arrival at the Clerk's Office :

Number of arrival at the Clerk's Office : 10838

NOTE : The Clerks and the National Institute of Industrial Property are obliged and sole authorised to issue to any person who requests it, certificates, copies or extracts from registrations made to the register and documents filed in appendix, except with regard to registrations which have been removed, notified in the condition fixed by the order (of September 24, 1984), provided for in article 88 (order n° 84-406 of May 30, 1994, art. 67).

JUSTIFYING DOCUMENTS :
REGULATED ACTIVITIES (item n° 24) :
DATE OF FILING OF THE STATUS :
CLERK'S OBSERVATIONS :

The conformity of the attached declarations with the justifying documents produced in application of regulations has been checked by the Clerk of the Court who has accordingly made the above registration.

DATE OF THE RECORDAL : MARCH 21, 2001

Certified by the Clerk of the Court

(seal)

Side reserved for the
National Trade and
Companies Register

SIDE RESERVED FOR THE
N.I.P.P.

The compliance of the attached statements with the justifying documents presented in accordance with the rules has been checked under our responsibility.

MANAGEMENT INITIATION COURSE (article 2 of the Law dated 12.23.82) Attestation - issuance date : Exemption - motive of the dispense :	JUSTIFYING DOCUMENTS	Minutes n° : Date : ☐ agreement ☐ refusal	Public notice from : Reference of counterfoil Register : ☐ cash ☐ bank cheque ☐ postal cheque Payment of the official fee : FF Date of notification : Date of transmission to the Commission : (articles 12 and 3 Decree of 06.10.83) In case of examination by the Crafts Chamber
In case of DECISION of the President of the Chamber Filing date : Request of additional information : Presentation of the requested information : Deadline of the President's Decision PRESIDENT'S DECISION : Date : ☐ agreement ☐ refusal			

CONTRIBUTOR MENTION ☐ RECORD OF JOINT ☐ REGISTRATION REQUEST	☐ MODIFICATION STATEMENT	☐ REMOVAL REQUEST ☐ REMOVAL OF JOINT CONTRIBUTOR MENTION
--	---	--

CRAFTS REGISTER

CRAFTS CHAMBER OF : Registration n° : SIREN : Trade or company name : Side reserved for the Crafts Chamber Docket No. :	
--	--

MODIFICATION STATEMENT		ENTITY			
M2 n° 90-0195 CERFA Statement submitted to CFE on MARCH 16, 2001 Reserved to the competent CFE	MODIFICATION STATEMENT of the COMPANY : ☒ CHARACTERISTICS ☐ OFFICERS ☒ TRANSFER OF HEADOFFICE ☐ WINDING UP ☐ of the ESTABLISHMENT : OPENING ☐ IDENTIFICATION ☐ OFFICERS ☐ ACTIVITIES ☐ CLOSING ☐ - Other modifications (to precise if needed) :	G9251 782214 0 Attached legal documents Attached insert			
PRINCIPAL REGISTRATION NUMBER(S) Trade and Companies Register SIREN : RCS NANTERRE 341 805 836					
WHATEVER THE FORMALITY, HEADINGS ON A RED BACKGROUND MUST BE FILLED UP AND IF THE MODIFICATION CONCERNS AN ESTABLISHMENT, HEADINGS ON A BLACK BACKGROUND MUST ALSO BE FILLED UP PRIOR IDENTIFICATION in case of modification : DENOMINATION : JEUMONT INDUSTRIE - JI					
IDENTIFICATION / and if needed new identification on : March 5, 2001 DENOMINATION : JEUMONT S.A.		ACRONYM : ACRONYM :			
HEADOFFICE (or in case of transfer, new headoffice) : ADDRESS, including if needed the PAYING AGENT IDENTITY (name, forenames or denomination) : TOUR FRAMATOME – 1 PLACE DE LA COUPOLE – 92400 COURBEVOIE					
SIRET No. : LEGAL FORM : société anonyme (joint stock company) (and particular status if needed) MAIN ACTIVITIES OF THE COMPANY : All operations relating to studies and industrial, commercial and financial realisations. WORKFORCE of the company :					
TRADE NAME : CAPITAL amount : FF or currency or, if variable capital, minimum amount FF or currency Legal Entity's duration : years ; or in case of company submitted to a yearly advertising of its accounts, CLOSING DATE of the legal exercise : day, month Modification date Modification date					
- OFFICERS and if needed, DIRECTORS, AUDITORS and PARTNERS indefinitely and jointly obliged to legal duties, MEMBERS of the GIE, LIQUIDATORS. - For the under described establishment, if needed, person(s) empowered to sign on behalf of the company (AUTHORIZED REPRESENTATIVE(S)), OWNERS.					
Or NAME Forenames DENOMINATION RESIDENCE HEADOFFICE ADDRESS Prior title (if needed) :	present or new title date of birth dept	Citizenship District or country of birth	NEW ☐	LEAVING ☐	MAINTAINED BUT MODIFIED ☐
Or NAME Forenames DENOMINATION RESIDENCE HEADOFFICE ADDRESS Prior title (if needed) Director	present or new title date of birth dept	Citizenship District or country of birth	☐	☐	☐
Or NAME Forenames DENOMINATION RESIDENCE HEADOFFICE ADDRESS Prior title (if needed)	present or new title date of birth dept	Citizenship District or country of birth	☐	☐	☐
PATENT					
List to follow on inserts : YES ☐ NO ☐ In case of DISSOLUTION : the Company pursues its exploitation for the liquidation needs : YES ☐ NO ☐ precise the frame OFFICERS the LIQUIDATOR(S) references Indicate the title and the date of the legal announcements paper having published the liquidator(s) nomination In case of HEADOFFICE TRANSFER falling with the competence of another Court, indicate the clerk's offices where are eventually subscribed the secondary registrations : List to follow on inserts : YES ☐ NO ☐ In case of MODIFICATION of the CAPITAL pursuant to a MERGER ☐ or a division ☐ legal Entities having taking part in the operation (Denomination, Legal Form, Head Office address, RCS No.) List to follow on inserts : YES ☐ NO ☐					

CONCERNED ESTABLISHMENT / and if needed NEW IDENTIFICATION on : ADDRESS : - if different from those of the headoffice (PRINCIPAL ESTABLISHMENT if it is integrated in the Head office) - in case of transfer, new address	SIRET No. :
This establishment is (for the company) : new () modified () cancelled () Categories : head office () main establishment () secondary establishment ()	PRIOR ESTABLISHMENT in case of transfer PRIOR ADDRESS WORDING if change by decision of the local council ADDRESS : In case of TRANSFER of the HEADOFFICE or of the ESTABLISHMENT, SIRET No. : If employment cease of any salaried, date : Maintain of an activity at the prior headoffice : YES () NO ()

ANALYSIS OF THE OPERATED MODIFICATION In case of OPENING of the establishment, of MODIFICATION of EXPLOITATION MODE, of ADJUNCTION OF ACTIVITY, precise and ORIGIN :		In case of CLOSING of the establishment, of EXPLOITATION MODE MODIFICATION, of ACTIVITY SUPPRESSION, precise and DESTINATION :	
☐ creation	☐ transfer of activity	☐ purchase	☐ merger
		☐ recovery after hire	☐ take on hire
		☐ management	☐ management
		☐ other (precise)	☐ other (precise)
PRIOR EXPLOITANT's identity : (name, forenames or denomination) RCS or SIREN No : If needed, removal or modification date on prior exploitant's RCS (to be filled eventually by the clerk)		BENEFICIARY's identity : Name, forenames, residence or denomination, Headoffice address	

In case of ACQUISITION of the BUSINESS (by PURCHASE or MERGER), indicate the title and the date of the legal publications having published the assignment :

In case of TAKING ON HIRE MANAGEMENT, indicate the contract duration : from _____ to _____ and if it is renewable by tacit agreement : YES ☐ NO ☐

BUSINESS HIRER OUT's identity :
Name, forenames, residence or denomination, headoffice address _____

OPERATED ACTIVITIES in this establishment at the formality date : permanent ☐ seasonal ☐ walking ☐ follow to ☐ ☐ of exploitation
To fulfill only if this establishment is new or if its activities have been modified _____ beginning _____ modification _____ ending _____

PRINCIPAL ACTIVITY : _____
SECONDARY ACTIVITIES : _____

Essential observations of the declarant or other modification(s) : ☒ PERMANENT ADDRESS : Head office and for the return of the formalities : J.S.S. 8 rue Saint-Augustin 75080 PARIS CEDEX 02 ☒ correspondence		building, stair, entry, block, tower road : No.		zip code postal office or cedex		Type wording phone : 01 47 03 10 10	
Town		our ref. : 137845/A.V		Done in :		PARIS	
THE UNDERSIGNED : Agnès BOUDAL		Agent		on :		March 14, 2001 (signature)	
Patronymic name, usual name, forenames – in case of attorney, precise also its titles and address		Asks that this document constitutes		INSCRIPTION request to RCS ☐ RM ☐ RSAC ☐ REBA ☐ RM ☐ RSAC ☐		signature :	
And statement to fiscal services, to social guarantee organisms, to INSEE, and if he is or ceases to be an employer.		CANCELLATION WITH RCS ☐ RM ☐ RSAC ☐ REBA ☐		to Work Inspection and to ASSEDIC		signature :	

20 MARS 2001

DECLARATION DE MODIFICATION

de L'ENTREPRISE : IDENTIFICATION ☒ CARACTÉRISTIQUES ☐ DIRIGEANTS ☐ TRANSFERT de SIÈGE ☐ DISSOLUTION ☐
de L'ÉTABLISSEMENT : OUVERTURE ☐ IDENTIFICATION ☐ DIRIGEANTS ☐ ACTIVITÉS ☐ FERMETURE ☐
Autres modifications (à préciser, s'il y a lieu) : _____

Décret n° 11-257 du 18 mars 1981 modifié créant des Centres de Formalités des Entreprises
NUMÉRO(S) DE L'IMMATRICULATION PRINCIPALE
RCS NANTERRE 341 805 836 RM _____
Régistre du Commerce et des Sociétés SIREN _____ Répertoire des Métiers

PERSONNE MORALE
réservée CFE complet
N° 90-0195
16/03/2001
révisé sur CFE complet

1 IDENTIFICATION / et le cas échéant NOUVELLE IDENTIFICATION au : 5/03/01.
DÉNOMINATION : JEUMONT S.A. SIREN : _____

IDENTIFICATION ANCIENNE en cas de modification :
DÉNOMINATION : JEUMONT INDUSTRIE - JI SIREN : _____

2 SIÈGE (ou en cas de transfert, nouveau siège) : ADRESSE y compris s'il y a lieu, l'IDENTITÉ DU DOMICILIAIRE (Nom, Prénoms ou Dénomination) : TOUR FRAMATOME - 1 PLACE DE LA COUPULE
92400 COURBEVOIE

SIÈGE : _____

3 FORME JURIDIQUE : Société anonyme
PRINCIPALES ACTIVITÉS DE L'ENTREPRISE : Toutes opérations d'études et de réalisations industrielles, commerciales, financières

DATE de la modification : _____

4 NOM COMMERCIAL : _____
CAPITAL montant : _____ ou si société à capital variable/montant minimum : _____
DURÉE de la Personne Morale : _____

DATE de la modification : _____

5 DIRIGEANTS et le cas échéant, ADMINISTRATEURS, COMMISSAIRES AUX COMPTES et ASSOCIÉS tenus indéfiniment et solidairement des dettes sociales MEMBRES du GIE LIQUIDATEURS.
Pour l'établissement décrit ci-dessous s'il y a lieu, Personne(s) ayant le pouvoir d'engager par sa (leur) signature la responsabilité de l'entreprise (FONDE(S) DE POLVOIR, PROPRIÉTAIRES INDIVIS DU FONDS).

DATE de la modification : _____

6 NOM PRÉNOMS : _____
DÉNOMINATION : _____
ADRESSE DU SIÈGE : _____

DATE de la modification : _____

7 NOM PRÉNOMS : _____
DÉNOMINATION : _____
ADRESSE DU SIÈGE : _____

DATE de la modification : _____

8 NOM PRÉNOMS : _____
DÉNOMINATION : _____
ADRESSE DU SIÈGE : _____

DATE de la modification : _____

9 En cas de DISSOLUTION : la Société, poursuit son exploitation pour les besoins de la liquidation : OUI ☐ NON ☒ , préciser dans le cadre DIRIGEANTS les références de (ou des) LIQUIDATEUR(S).
Indiquer le titre et la date du journal d'annonces légales ayant publié la nomination du (ou des) liquidateur(s) : _____

DATE de la modification : _____

10 En cas de TRANSFERT du SIÈGE dans le ressort d'un autre Tribunal, indiquer les GREFFES où sont éventuellement souscrites les immatriculations secondaires : _____

DATE de la modification : _____

11 En cas de MODIFICATION du CAPITAL à la suite d'une FUSION ☐ ou d'une SCISSION ☐ , Personnes Morales ayant participé à l'opération (Dénomination, Forme Juridique, Adresse du siège, n° RCS) : _____

DATE de la modification : _____

12 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

13 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

14 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

15 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

16 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

17 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

18 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

19 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

20 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

21 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

22 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

23 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

24 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

25 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

26 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

27 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

28 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

29 Liste à suivre sur intercalaire(s) : OUI ☐ NON ☒

DATE de la modification : _____

ANCIEN ÉTABLISSEMENT en cas de transfert
ANCIEN LIBELLÉ DE L'ADRESSE si changement par décision du conseil municipal
ADRESSE : _____

En cas de TRANSFERT du SIÈGE ou de l'ÉTABLISSEMENT, N° SIREN : _____
Si cessation d'emploi de tout salarié, date : _____
Maintien d'une activité à l'ancien siège : OUI ☐ NON ☒

ANALYSE DE LA MODIFICATION INTERVENUE

1 En cas d'OUVERTURE de l'établissement, de MODIFICATION DU MODE D'EXPLOITATION, d'ADJONCTION D'ACTIVITÉ, préciser : DATE de la modification : _____ et ORIGINE : _____
☐ création ☐ transfert d'activité ☐ achat ☐ apport ☐ reprise après loc. gérance ☐ cession en location gérance ☐ autre (préciser) : _____

2 En cas de FERMETURE de l'établissement, de MODIFICATION DU MODE D'EXPLOITATION, de SUPPRESSION D'ACTIVITÉ, préciser : DATE de la modification : _____ et DESTINATION : _____
☐ disparition ☐ transfert d'activité ☐ vente ☐ apport ☐ reprise par le propriétaire ☐ mise en location gérance ☐ autre (préciser) : _____

Identité du BÉNÉFICIAIRE : _____
nom, prénoms, domicile ou dénomination, adresse du siège

Identité du PRÉCÉDENT EXPLOITANT : _____
nom, prénoms ou dénomination

N° RCS ou SIREN : _____
S'il y a lieu, date de radiation ou de modification au RCS du précédent exploitant : _____

En cas d'ACQUISITION de FONDS (par ACHAT ou APPORT), Indiquer le titre et la date du journal d'annonces légales ayant publié la cession : _____

En cas de PRISE EN LOCATION-GÉRANCE, Indiquer la durée du contrat : du _____ au _____ ou s'il est renouvelable par tacite reconduction : OUI ☐ NON ☒

Identité du LOUEUR de FONDS : _____
nom, prénoms, domicile ou dénomination, adresse du siège

13 ACTIVITÉS EXERCÉES dans cet établissement au jour de la formalité : permanentes ☐ saisonnières ☐ ambulant ☐ / suite à _____ modification ☐ d'exploitation ☐

14 ACTIVITÉ PRINCIPALE : _____

15 ACTIVITÉS SECONDAIRES : _____

16 Observations éventuelles du déclarant ou autre(s) modification(s) : _____

17 ADRESSE PERMANENTE : Au Siège & pour retour des formalités R.C. -> J.S.S. 8 rue Saint-Augustin
75080 PARIS CEDEX 02

18 LE SOUSSIGNÉ : Agnès BOUDAL Mandataire Nos Refs : 137845/A.V.
demande que ce document constitue demande d'INSCRIPTION au RCS ☐ au RM ☐ au RSAC ☐ au REBA ☐ de RADIATION au RCS ☐ au RM ☐ au RSAC ☐ au REBA ☐
et déclaration aux Services Fiscaux, aux Organismes de Sécurité Sociale, à l'INSEE, et s'il est ou cesse d'être EMPLOYEUR, à l'Inspection du Travail et à l'ASSEDIC

Fait à : _____ le : _____ signature : _____

19 PATENT REEL: 012391 FRAME: 0690

[illegible]