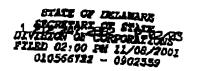
	RECORDATION F PATENTS ONLY	ABME-06	7-22-2003
To The Honorable Commissioner			reof.
1. Name of conveying party(ies):	7.18.73		102504407
ABB Automation Inc.	10/31/2001	Name: ABB INC	
First Assignor	Date of Execution	Street Address: 208	South Rogers Lane
Second Assignor	Date of Execution	City: Raleigh	
Third Assismon	Date of Execution	State North Carolina	ZIP 27610
Third Assignor	Date of Execution	(	k address attached? 🔲 YES 🔀 NO
Fourth Assignor	Date of Execution	3. Nature of Convey	ance (check only one):
Fifth Assignor	Date of Execution	☐ New Assignment ☐ License Agreeme ☐ Change of Name	ent Security Agreement
Sixth Assignor	Date of Execution		
Additional name(s) of conveying party(ies	s) attached? 🗌 YES 🔀 NO		M 7: 39 SECTION
			NO. NO. 86 :4
4. Identification of Application m			pplication to which assignment refers:
Application Nos.: 09/524,200	Patent Nos.: 6,07	3,169	Date application was signed by the first named executing inventor
			(Fill-in this date only if assignment is filed together with a new application)
5. Name and address of party to we concerning documents should be r		6. Total number of a	pplications and patents involved: 2
Name: Lawrence A. Aaronsoi WOODCOCK WASHBURN LLP		7. Total fee (37 C)  Enclosed	FR 3.41): \$80.00
One Liberty Place - 46th Floor Philadelphia, Pennsylvania 19103			to be charged to Deposit Account Number
215-568-3100		8. Please charge an Deposit Account	y deficiency or credit any overpayment to Number 23-3050
	DO NOT US	EE THIS SPACE	
9. Statement and signature.  To the best of my knowledge and	belief, the foregoing informat	ion is true and correct	and any attached copy is a true copy of the
original document. Lawrence A. Aaronson/Reg. No	o. 38,369	LA M	July 16, 2003
Name of Person Signing/Reg. No.	Si	gnature	Date
Total number of	pages including cover sheet, a	ssignment document ar	nd additional pages attached thereto: 9
Mail documents to be recorded with requir	ed cover sheet information to:		
/21/2003 LINELLER 00000090 09524200	Commissio	ent Recordation Services oner for Patents	
FC:8021 80	TAA ON	Box 1450 VA 22313-1450	

PATENT REEL: 014277 FRAME: 0796



# CERTIFICATE OF MERGER ABB AUTOMATION INC.

INTO

ABB INC.

\*\*\*\*\*\*\*

The undersigned corporation DOES HEREBY CERTIFY:

FIRST: That the name and state of incorporation of each of the constituent corporations of the merger is as follows:

NAME

**STATE OF INCORPORATION** 

ABB Automation Inc.

Ohlo

ABS Inc.

Delaware

SECOND: That an Agreement of Merger between the parties to the merger has been approved, adopted, certified, executed and acknowledged by each of the constituent corporations in accordance with the requirements of section 252 of the General Corporation Law of Delaware.

THIRD: That the name of the surviving corporation of the merger is ABB inc., a Delaware corporation.

FOURTH: That the Certificate of Incorporation of ASB Inc., a Delaware corporation which is surviving the merger, shall be the Certificate of Incorporation of the surviving corporation.

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FIFTH: That the executed Agreement of Merger is on file at an office of the surviving corporation, the address of which is 501 Merritt 7, Norwalk, Connecticut 08851.

SEXTH: That a copy of the Agreement of Merger will be furnished by the surviving corporation, on request and without cost, to any stockholder of any constituent corporation.

SEVENTH: The authorized capital stock of each foreign corporation which is a party to the merger is as follows:

Corporation

Class

Number of Shares

Par value per share or statement that shares are without

ABB Automation Inc.

Common

100

No Par Value

dar value

EIGHTH: That this Certificate of Merger shall be effective on January 1, 2002.

Dated: October 31, 2001

ABB INC.

Vice President



## Prescribed by J. Kenneth Blackwell

Please obtain for amount and mailing instructions from the Filing Reference Guide (using the 3 digit from # located at the bottom of this form). To obtain the Filing Reference Guide or for assistance, please call Customer Service;

Expedite is an additional fee of \$100.00 Expedite

Central Ohio: (614)-466-3910 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

#### **CERTIFICATE OF MERGER**

L	A. TI	accordance with the requirements of Ohio law, the undersigned corporations, banks, saving formly, savings and loan, limited liability companies, limited partnerships and/or partnerships with limited liability desiries to feet a meager, set forth the following facts:  IRVIVING ENTITY  Le name of the entity surviving the merger is:  E Inc. (ABB inc.)
	B. Na N/A	me Change: As a result of this merger, the name of the surviving entity has been changed to the following:
	(Complet	e only if name of surviving entity is alamping through the nergar)
	C. Th	E surviving entity is a: (Please check the appropriate box and fill in the appropriate blanks)
		Domestic (Obio) for profit corporation, charter number
	· 🗖	Domestic (Ohio) non-profit corporation, charter number
	. 🗹	Foreign (Non-Ohio) corporation incorporated under the laws of the state/country of and licensed to transact business in the State of Ohio under license number  567124
		Foreign (Non-Ohio) corporation incorporated under the laws of the state/country of and NOT licensed to transact business in the state of Ohio,
	· 🗖	Domestic (Ohio) limited liability company, with registration number
		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 under registration number
		Foreign (Non-Ohio) limited lishility 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, with registration number
		Foreign (Non-Ohio) limited partnership organized under the laws of the state/country of and registered to do business in the state of Ohio under registration number
		Foreign (Non-Ohio) limited partnership organized under the laws of the state/country of and NOT registered to do business in the state of Ohio.
		Domestic (Ohio) partnership having limited liability, with the registration number

#### Secretary of State

		Foreign (Non-Ohio) partnership having lin and register		under the laws of the state/co state of Ohio under registration	
		Pareign (Non-Ohio) non-profit incorporati and licensed to transact business in the stat			
		Foreign (Non-Ohio) non-profit incorporati and not licensed to transact business in the		state/county of	
	The nar which i	ERGING ENTITY  ne, charter/license/registration number, type s a party to the merger are as follows: (If this ting the merging entities)	of entity, state/country of is insufficient space to ref	f incorporation or organization loct all merging entities, please	n, respectively, of attach a separate
	Name		State/	Country of Organization	Type of Entity
•	ARR V	ntomation Inc. (Charter No. 316177)		Ohio	Corporation
m	The nar	ERGER AGREEMENT ON FILE  me and mailing address of the person or entity ter upon written request:  Engene E. Madara	from whom/which elig	fible persons may obtain a cop	by of the agreement
		(name)		(street and grambs	Λ
		Norwalk		CT	6851
,		(sity, village or township)		(state)	(zip code)
IV.	This ma	FFECTIVE DATE OF MERGER  seger is to be effective on: Jamesy 1, 2002  the effective date of the merger cannot be earl  the effective date of the merger).		i, the date must be a date on one of the date is specified, the d	
<b>v.</b>	The lav This mu under v	ERGER AUTHORIZED  ve of the state or country under which each co erger was adopted, approved and authorized to which it is organized, and the persons signing zed to do so.	by each of the constituen	t entities in compliance with	
VL		CATUTORY AGENT me and address of the surviving entity's statut	ory agent upon whom a	ny process, notice or demand	may be served is:
		CT Corporation System		1300 East 9th Street	<u> </u>
		(Marrie)	. Ohio	(affect and number) 44114	
		Cleveland (city, village or township)	, CMU	(zip code)	
		em MUST be completed if the surviving entity ized to conduct business in the state of Ohio)	) is a foreign entity whic	1 .	r otherwise
VII.	The up	CCEPTANCE OF AGENT denigned, named herein as the statutory ages sents the appointment of statutory agest for a		ed surviving entity, hereby ac	knowledges

PATENT REEL: 014277 FRAME: 0800

	•	Secretary of State
VΠ		ACCEPTANCE OF AGENT
	The	undersigned, named herein as the statutory agent for the above referenced surviving entity, hereby acknowledges
		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 currently on record with the Secretary of State.)
VΠ		STATEMENT OF MERGER
	Upo	n filing, or upon such later date as specified herein, the merging entity/entities listed herein shall merge into the listed iving entity
D.		AMENDMENTS
	limi	articles of incorporation, articles of organization, certificate of limited partnership or registration of partnership having ted liability (circle appropriate term) of the surviving domestic entity have been amended. Please see attached "Exhibit A." ase note, if there will be no change please state "no change")
	A.	The listed surviving foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability desires to transact business in Ohio as a foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability, and hereby appoints the following as its statutory agent upon whom process, notice or demand against the entity may be served in the state of Ohio. The name and complete address of the statutory agent is:
		(pame) (street and number)
		(city, village or towaship) (zip code)
	В.	The subject surviving foreign corporation, bank, savings bank, savings and losn, limited liability company, limited partnership, or partnership having limited liability interceptly consents to service of process on the statutory agent listed above as long as the authority of the agent continues, and to service of process upon the Secretary of State of Chio if the agent cannot be found, if the corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or partnership having limited liability fails to designate another agent when required to do so, or if the foreign
	Д.	corporation's, bank's, savings bank's, savings and loan's, limited liability company's, limited partnership's, or partnership having limited liability's license or registration to do business in Ohio expires or is canceled.  The qualifying entity also states as follows: (Complete only if applicable)  1. Foreign Notice Under Section 1763.031  (If the qualifying entity is a foreign bank, savings bank, or savings and loan, then the following information must be completed.)  (a.) The name of the Foreign Nationally/Federally chartered bank, savings bank, or savings and loan association is
	Б.	having limited liability's license or registration to do business in Ohio expires or is canceled.  The qualifying entity also states as follows: (Complete only if applicable)  1. Foreign Notice Under Section 1703.031  (If the qualifying entity is a foreign bank, savings bank, or savings and loan, then the following information must be completed.)

PATENT REEL: 014277 FRAME: 08012-62-NUL

(state)

(sip sods)

(city, township, or village)

(c.) The location of the main office (non-Ohio) shall be:

(street address)

#### Secretary of State

		(street address)		
•	(city, township, or village) (Please note, if there will not be an office	(county) e in the state of Ohio, picase lis	(sieie) £ Bone.)	(zip code
(e.)	The corporation will exercise the following (Please provide a brief summary of the bus			()
(If <b>t</b>	eign Qualifying Limited Liability Compa he qualifying entity is a foreign limited liab The name of the limited liability company	ility company, the following inf		aleted)
<b>(b.)</b>	The name under which the limited liability	y company desires to transact bu	siness in Ohio is	
	The limited liability company was organizer the laws of the state/country of	red or registered on		
	The address to which interested persons m	nav direct requests for copies of	the articles of organizat	ion, operating
	sement, bylaws, or other charter documents			
		(sireet address)		
	(city, 10 wachip, or village)		(state)	(zip codo)
(If t	(dty, township, or village) eign Qualifying Limited Fartnership he qualifying entity is a foreign limited part The name of the limited partnership is		• ,	
(If 8 (2)	eign Qualifying Limited Fartnership he qualifying entity is a foreign limited par		• ,	
(If 8 (2) (b).	eign Qualifying Limited Partnership he qualifying entity is a foreign limited par The name of the limited partnership is	tnership, the following informst	ion must be completed)	
(If 8 (2) (b).	eign Qualifying Limited Fartnership the qualifying entity is a foreign limited par The name of the limited partnership is The limited partnership was formed on	tnership, the following informst	ion must be completed)	
(If 8 (2) (b). (c.)	eign Qualifying Limited Fartnership the qualifying entity is a foreign limited par The name of the limited partnership is The limited partnership was formed on	thership, the following information thership in its state/country of (street address)	ion must be completed)	
(If 8 (2) (b). (c.)	eign Qualifying Limited Partnership the qualifying entity is a foreign limited part The name of the limited partnership is The limited partnership was formed on The address of the office of the limited pa	thership, the following information thership in its state/country of (street address)	ion must be completed) organization is:	
(If 8 (2) (b). (c.)	eign Qualifying Limited Partnership the qualifying entity is a foreign limited part The name of the limited partnership is The limited partnership was formed on The address of the office of the limited pa  (city, township, or village) The limited partnership's principal office (city, township, or village)	thership, the following information in its state/country of (	on must be completed)  organization is:  (state)	(zip cod
(If 8 (2) (b). (c.)	eign Qualifying Limited Partnership the qualifying entity is a foreign limited part The name of the limited partnership is The limited partnership was formed on The address of the office of the limited pa  (city, towaship, or village) The limited partnership's principal office	thership, the following information in its state/country of (	on must be completed)  organization is:  (state)	(zip cod

#### Secretary of State

The limited partnership hereby certifies that it shall maintain said records until the registration of the limited partnership in Ohio is canceled or withdrawn.  Foreign Qualifying Partnership Having Limited Liability  (a) The name of the partnership shall be  (b.) Please complete the following appropriate section (either item b(1) or b(2)):  (1.) The address of the partnership's principal office in Ohio is:  (street name and number)  (city, village or township)  (zip code)  (If the partnership does not have a principal office in Ohio, then items b2 and item c must be completed)  (2.) The address of the partnership's principal office (Non-Ohio):					
The limited partnership hereby certifies that it shall maintain said records until the registration of the limited partnership in Ohio is canceled or withdrawn.  Foreign Qualifying Partnership Having Limited Liability  (a.) The name of the partnership shall be  (b.) Please complete the following appropriate section (either item b(l) or b(2)):  (1.) The address of the partnership's principal office in Ohio is:  (reset name and anamed)  (city, village or township)  (place in Ohio, then items b2 and item c must be completed)  (2.) The address of the partnership's principal office (Non-Ohio):  (altered address)  (city, trenship, or village)  (city, trenship, or village)  (city, village or township)  (city, village or township)			(street address)		
(a) The name of the partnership shall be  (b.) Please complete the following appropriate section (either item b(1) or b(2)):  (1.) The address of the partnership's principal office in Ohio is:  (street name and annual partnership (eity, village or township)  (city, village or township)  (2.) The address of the partnership's principal office (Non-Ohio):  (city, township, or village)  (city, village or township)  (city, village or township)  (city, village or township)  (city, village or township)  (city ode)  (city, village or township)  (city ode)		The limited partnership hereby certifies that	it shall maintain said recor		e gizig bestimit e
(1.) The address of the partnership's principal office in Ohio is:  (these name and number)  (city, village or township)  (the partnership does not have a principal office in Ohio, then items b2 and item c must be completed)  (2.) The address of the partnership's principal office (Non-Ohio):  (attent address of the partnership's principal office (Non-Ohio):  (city, township, or village)  (city, township, or village)  (city, township, or village)  (city, village or township)  (city, village or township)  (city, village or township)  (city, village or township)  (city ode)  (d.) Please indicate the state or jurisdiction in which the Poreign Limited Linbility Partnership has been formed			ed Liability		-
(city, village or township)  (The partnership does not have a principal effice in Ohto, then items b2 and item c must be completed)  (2.) The address of the partnership's principal office (Non-Ohio):  (atrest address)  (city, township, or village)  (city, township, or village)  (city, township)  (city, village or township)	(b.)	Please complete the following appropriate as (1.) The address of the partnership's princip	ection (either item b(l) or l al office in Ohio is:	(2)):	
(city, village or township)  (zip code)  (If the partnership does not have a principal effice in Ohto, then items b2 and item c must be completed)  (2.) The address of the partnership's principal office (Non-Ohio):  (attest address)  (city, township, or village)  (city, village or township)  (city, village or township)  (city, village or township)  (city, village or township)  (city code)  (d.) Please indicate the state or jurisdiction in which the Foreign Limited Linbibity Partnership has been formed			, , , , , , , , , , , , , , , , , , , ,	io	
(c.) The address of the partnership's principal office (Non-Ohio):  (street address)  (city, township, or village)  (c.) The name and address of a statutory agent for service of process in Ohio is as follows:  (name)  (city, village or township)  (city, village or township)  (city, village or township)  (city, village or township)  (city ode)  (d.) Please indicate the state or jurisdiction in which the Foreign Limited Linbility Partnership has been formed		(city, village of townshi	- معقبالانهان المساورة المساور		
(city, township, or village)  (c.) The name and address of a statutory agent for service of process in Ohio is as follows:  (name)  (name)  (city, village or township)		(2.) The address of the partnership's princip	ul office (Non-Ohio):		
(c.) The name and address of a statutory agent for service of process in Ohio is as follows:  (users)  (otrest and number)  (city, village or loweship)			(street address)		
(city, village or loweship)  (city, village or loweship)  (d.) Please indicate the state or jurisdiction in which the Foreign Limited Liability Partnership has been formed	(c.)			<del>-</del> -	(200)
(city, village or township)  (d.) Please indicate the state or jurisdiction in which the Foreign Limited Lisbility Partnership has been formed					
		(name)	. Ohio	(POSSE NEG ENTERAL)	
(e.) The business which the partnership engages in is:		<u> </u>	, Ohio		
	( <del>c</del> )	(city, village or lowaship)		(zip code)	formed
		(city, village or loweship) Please inclicate the state or jurisdiction in wi	nich the Poreign Limited L	(zip code)	formed
		(city, village or loweship) Please inclicate the state or jurisdiction in wi	nich the Poreign Limited L	(zip code)	formed
	(e)	(city, village or township) Please indicate the state or jurisdiction in wi	nich the Poreign Limited L	(zip code) isbihity Partnership has been	
dersigned constituent entitles have caused this certificate of merger to be signed by its doly authorized , partners and representatives on the date(s) stated below.	(c)	(city, village or township)  Please indicate the state or jurisdiction in wi  The business which the partnership engages  sed constituent entitles have caused this ce	nich the Poreign Limited L in is: rtificate of merger to be	(zip code) isbihity Partnership has been	
, partners and representatives on the date(s) stated below.	barg erzjā	(city, village or township)  Please indicate the state or jurisdiction in wi  The business which the partnership engages  ned constituent entitles have caused this ca	in is:  rtilicate of merger to be ed below.	(zip code) isbility Partnership has been ligaed by its duly authorize	
partners and representatives on the date(s) stated below.  ABB DE Inc. (ABB Inc.)  (Exact same of easity)	ersig:	(city, village or township)  Please indicate the state or jurisdiction in with the partnership engages  ned constituent entitles have caused this capacitant and representatives on the date(s) station inc.	in is:  rtticate of merger to be ed below.  ABB DE Inc.	(zip code) isbility Partnership has been ligaed by its doly authorize (ABB Inc.)	
partners and representatives on the date(s) stated below.  ABB DE Inc. (ABB Inc.)  (Exact same of easity)	ersig:	(city, village or township)  Please inclicate the state or jurisdiction in with the partnership engages  ned constituent entitles have caused this causes and representatives on the date(s) station inc.	in is:  rtticate of merger to be ed below.  ABB DE Inc.	(zip code) isbility Partnership has been ligaed by its doly authorize (ABB Inc.)	
partners and representatives on the date(s) stated below.  ABB DE Inc. (ABB Inc.)	ersig:	(city, village or township)  Please inclicate the state or jurisdiction in with the partnership engages  ned constituent entitles have caused this causes and representatives on the date(s) station inc.	in is:  rtticate of merger to be ed below.  ABB DE Inc.	(zip code) isbility Partnership has been ligaed by its doly authorize (ABB Inc.)	

#### State of Delaware

# Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, 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:

"ABB AUTOMATION INC.", A OBIO CORPORATION,

WITE AND INTO "AEB INC." UNDER THE NAME OF "ABB INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE THE EIGHTH DAY OF NOVEMBER, A.D. 2001, AF 2 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF MERGER IS THE FIRST DAY OF JANUARY, A.D. 2002.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER: OF DEEDS.



Warriet Smith Windson Sucretary of State

0902559 8100M

010566732

AUTHENTICATION: 1497317

DATE: 11-09-01

PATENT

14931 394: WORL St: ST 5002-62-NU

REEL: 014277 FRAME: 0804