

VIA TELEFACSIMILE: 703-306

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PATENTS ONLY

Attorney Docket #
10624-C
CAM #700755-

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Please record the attached original documents or copy thereof.

<p>1. Name of conveying party(ies): Signal Pharmaceuticals, Inc.</p> <p>Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies):</p> <p>Name: <u>Signal Pharmaceuticals, LLC</u></p> <p>Address: <u>4550 Towne Centre Court</u> <u>San Diego, California 92121</u></p> <p>Country (if other than USA): Zip Code:</p> <p>Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Nature of conveyance:</p> <p>Assignment Merger</p> <p>Security Agreement Change of Name</p> <p><input checked="" type="checkbox"/> Other <u>Conversion from "Inc." to "LLC"</u></p> <p>Execution Date: <u>April 28, 2003</u></p>	

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) 10/004,642 filed December 4, 2001 B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>JONES DAY 222 East 41st Street New York, New York 10017</p>	<p>6. Number of applications and patents involved: <u>One</u></p> <p>7. Total fee (37 CFR 3.41):.....\$ 40.00 Please charge to the deposit account listed in Section 8.</p> <p>8. Deposit account number: <u>50-3013</u></p>
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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.

For: Anthony M. Insogna
By: Michael J. Bruner
Name of Person Signing

35,203
47,458
Reg. No.

Anthony M. Insogna, Reg. No. 35,203
By: Michael J. Bruner, Reg. No. 47,458
Signature

June 29, 2003
Date

Total number of pages including cover sheet: 1

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OVER SHEET
NLYAttorney Docket N
10624-0
CAM #700755-5Mail Stop Assignment Recordation Services
Director of the United States Patent and Trademark Office
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Alexandria, VA 22313-1450

Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Signal Pharmaceuticals, Inc.

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:

Assignment

Merger

Security Agreement

Change of Name

☒ Other Conversion from "Inc." to "LLC"Execution Date: April 28, 2003 and September 4, 2003

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

Name: Signal Pharmaceuticals, LLCAddress: 4550 Towne Centre Court
San Diego, California 92121

Country (if other than USA): Zip Code:

Additional name(s) & address(es) attached? ☐ Yes ☒ No

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

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50-3013

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*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.**Michael J. Bruner, Reg. No. 47,458*

For: Anthony M. Insogna

35,203

Signature

By: Michael J. Bruner

47,458

January 14, 2007

Name of Person Signing

Reg. No.

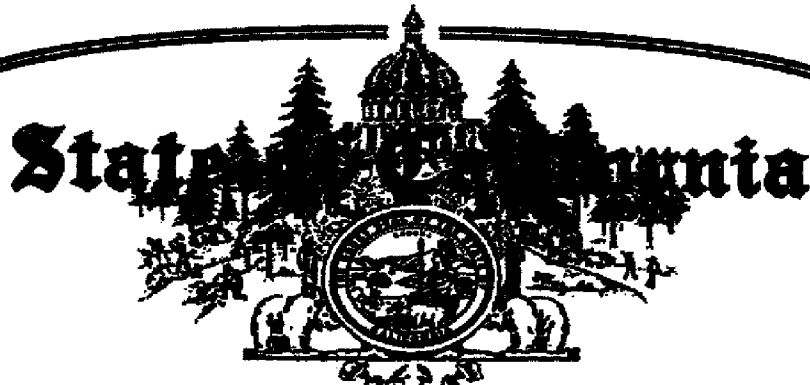
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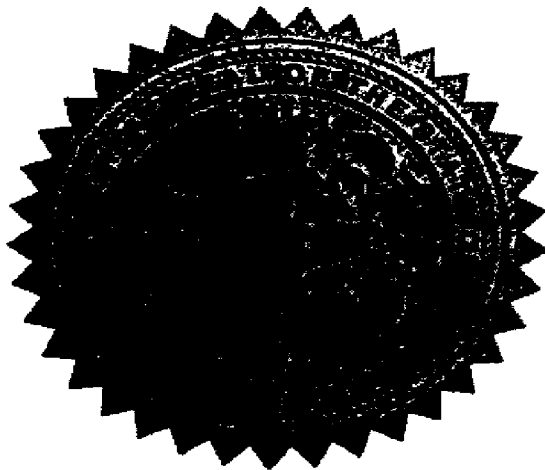
**SECRETARY OF STATE**

I, *Kevin Shelley*, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

MAY - 6 2003



Kevin Shelley
Secretary of State



State of California
Kevin Shelley
Secretary of State

LIMITED LIABILITY COMPANY
ARTICLES OF ORGANIZATION - CONVERSION

2003122101

File #

ENDORSED - FILE
 In the office of the Secretary of State
 of the State of California

APR 28 2003

KEVIN SHELLEY
Secretary of State

IMPORTANT — READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

This Space For Filing Use Only

CONVERTED ENTITY INFORMATION

1. NAME OF LIMITED LIABILITY COMPANY
Signal Pharmaceuticals, LLC
2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.
3. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (CHECK ONLY ONE)

☐ ONE MANAGER ☐ MORE THAN ONE MANAGER ☒ SINGLE MEMBER LIMITED LIABILITY COMPANY ☐ ALL LIMITED LIABILITY COMPANY MEMBERS

4. TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY (FOR INFORMATIONAL PURPOSES ONLY)

Biopharmaceutical

5. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE
4550 Towne Centre Court CITY AND STATE San Diego, CA ZIP CODE 92121

6. CHECK THE APPROPRIATE PROVISION BELOW AND NAME THE AGENT FOR SERVICE OF PROCESS

☒ AN INDIVIDUAL RESIDING IN CALIFORNIA.
☐ A CORPORATION WHICH HAS FILED A CERTIFICATE PURSUANT TO CALIFORNIA CORPORATIONS CODE SECTION 1505.

AGENT'S NAME Alan Lewis

7. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA, IF AN INDIVIDUAL
5555 Oberlin Drive CITY San Diego STATE CA ZIP CODE 92121

CONVERTING ENTITY INFORMATION

8. NAME OF CONVERTING ENTITY
Signal Pharmaceuticals, Inc.
9. FORM OF ENTITY Corporation 10. JURISDICTION California 11. CA SECRETARY OF STATE FILE NUMBER, IF ANY C1825592
12. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES EACH CLASS THAT EQUATED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING:

NUMBER OF OUTSTANDING INTERESTS OF EACH CLASS ENTITLED TO VOTE	PERCENTAGE VOTE REQUIRED
1,000 shares of common stock	66.67

ADDITIONAL INFORMATION

13. NUMBER OF PAGES ATTACHED, IF ANY: _____ THE ATTACHED PAGES ARE INCORPORATED HEREIN BY THIS REFERENCE
14. I DECLARE THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

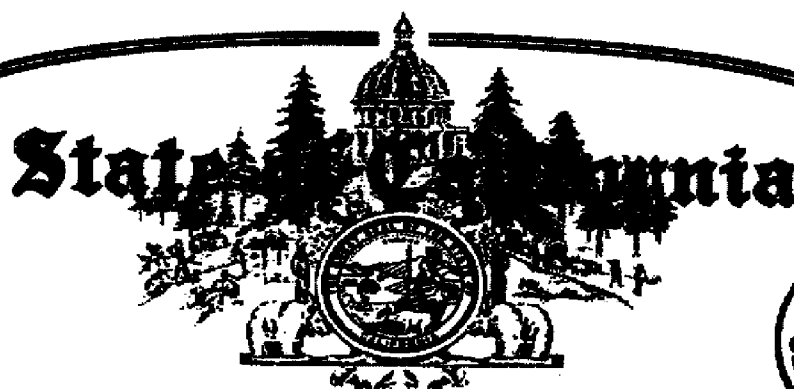
SIGNATURE OF AUTHORIZED PERSON

SIGNATURE OF AUTHORIZED PERSON



John W. Jackson Chief Executive Officer
 TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

Robert J. Hugin Chief Financial Officer
 TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON



SECRETARY OF STATE

I, *Kevin Shelley*, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

SEP 12 2003



Kevin Shelley
Secretary of State



State of California
Kevin Shelley
Secretary of State

LIMITED LIABILITY COMPANY
CERTIFICATE OF AMENDMENT

A \$30.00 filing fee must accompany this form.

IMPORTANT - Read instructions before completing this form.

ENDORSED - FILE!
 In the office of the Secretary of State
 of the State of California

SEP 04 2003

KEVIN SHELLEY
Secretary of State

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1. SECRETARY OF STATE FILE NUMBER
 200312210170

2. NAME OF LIMITED LIABILITY COMPANY
 Signal Pharmaceuticals, LLC

3. COMPLETE ONLY THE SECTIONS WHERE INFORMATION IS BEING CHANGED. ADDITIONAL PAGES MAY BE ATTACHED IF NECESSARY.

A. LIMITED LIABILITY COMPANY NAME (END THE NAME WITH THE WORDS "LIMITED LIABILITY COMPANY," "LTD. LIABILITY CO." OR THE ABBREVIATIONS "LLC" OR "L.L.C.")

B. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (CHECK ONE):

- ☐ ONE MANAGER
☒ MORE THAN ONE MANAGER
☐ ALL LIMITED LIABILITY COMPANY MEMBER(S)

C. AMENDMENT TO TEXT OF THE ARTICLES OF ORGANIZATION:

D. OTHER MATTERS TO BE INCLUDED IN THIS CERTIFICATE MAY BE SET FORTH ON SEPARATE ATTACHED PAGES AND ARE MA A PART OF THIS CERTIFICATE. OTHER MATTERS MAY INCLUDE A CHANGE IN THE LATEST DATE ON WHICH THE LIMITED LIABILITY COMPANY IS TO DISSOLVE OR ANY CHANGE IN THE EVENTS THAT WILL CAUSE THE DISSOLUTION.

4. FUTURE EFFECTIVE DATE, IF ANY:

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DAY

YEAR

5. NUMBER OF PAGES ATTACHED, IF ANY:

6. IT IS HEREBY DECLARED THAT I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

SIGNATURE OF AUTHORIZED PERSON

Robert J. Hugin member
 TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

DATE

8/26/03

7. RETURN TO:

NAME Andrew Eitington
 FIRM Proskauer Rose LLP
 ADDRESS 2049 Century Park East, Suite 3200
 CITY/STATE Los Angeles, California
 ZIP CODE 90067

