

04/20/2011

Form PTO-1595 (Rev 03-11)
OMB No 0651-0027 (exp 03/31/2012)



U S DEPARTMENT OF COMMERCE
United States Patent and Trademark Office

R

103623556

T

PATENTS ONLY

To the Director of the U S Patent and Trademark Office Please record the attached documents or the new address(es) below

1. Name of conveying party(ies)

NuCedar Mills, Inc

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

3. Nature of conveyance/Execution Date(s):

Execution Date(s) March 31, 2011

- Assignment Merger
- Security Agreement Change of Name
- Joint Research Agreement
- Government Interest Assignment
- Executive Order 9424, Confirmatory License
- Other _____

2. Name and address of receiving party(ies)

Name: Jain (Americas) Inc.

Internal Address: _____

Street Address: 1819 Walcutt Road, Suite 1

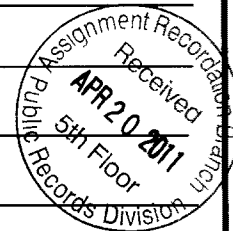
City: Columbus

State: Ohio

Country: US

Zip: 43228

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



4/20/2011

4. Application or patent number(s):

This document is being filed together with a new application

A Patent Application No.(s)

11/750,457; 12/703,222; 12/778,211; 61/326,720

B. Patent No.(s)

7,482,038; 7,597,036; 7,776,399; 7,748,190; 7,887,902

Additional numbers attached? Yes No

5. Name and address to whom correspondence concerning document should be mailed:

Name: Josef Keglewitsch, Esq.

Internal Address Schottenstein, Zox & Dunn Co., L.P.A.

Street Address: 250 West Street

City: Columbus

State: Ohio

Zip: 43215-2538

Phone Number (614) 462-2279

Fax Number (614) 222-3450

Email Address: jkeglewitsch@szd.com

6. Total number of applications and patents involved: 9

7. Total fee (37 CFR 1.21(h) & 3.41) \$ 360.00

- Authorized to be charged to deposit account
- Enclosed
- None required (government interest not affecting title)

8. Payment Information

04/20/2011 MAIL 00000022 503259 1175045
Deposit Account Number 503259

01 FC:0021 350.00 04
Authorized User Name Barbara Bacon

9. Signature:

[Signature]
Signature

April 14, 2011

Date

Josef Keglewitsch

Name of Person Signing

Total number of pages including cover sheet, attachments, and documents

13

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O.Box 1450, Alexandria, V.A 22313-1450

PATENT
REEL: 026209 FRAME: 0547

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, 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:

"NUCEDAR MILLS, INC.", A DELAWARE CORPORATION,
WITH AND INTO "JAIN (AMERICAS) INC." UNDER THE NAME OF "JAIN (AMERICAS) INC.", A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF OHIO, AS RECEIVED AND FILED IN THIS OFFICE THE THIRTY-FIRST DAY OF MARCH, A.D. 2011, AT 4:56 O'CLOCK P.M.

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

4962928 8100M

110366280

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8665818

DATE: 04-01-11

PATENT
REEL: 026209 FRAME: 0548

IN WITNESS WHEREOF, said surviving corporation has caused this certificate to be signed by an authorized officer, the 31st _____ day of March _____, A.D., 2011.

By:  _____
Authorized Officer

Name: Murali Ramanathan
Print or Type

Title: Executive Vice President

201109100064

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
04/01/2011	201109100064	MERGER/FOREIGN (FMR)	125 00	300 00	00	.00	.00

Receipt

This is not a bill Please do not remit payment

SCHOTTENSTEIN, ZOX & DUNN CO., LPA
250 WEST STREET
ATTN: HEIDI BOWMAN
COLUMBUS, OH 43215-2538

**STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jon Husted**

1023077

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
JAIN (AMERICAS) INC.

and, that said business records show the filing and recording of:

Document(s)
MERGER/FOREIGN

Document No(s):
201109100064



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 31st day of March, A.D.
2011.

Jon Husted

Ohio Secretary of State

**PATENT
REEL: 026209 FRAME: 0551**



Form 551 Prescribed by the
Ohio Secretary of State
Central Ohio: (614) 466-3810
Toll Free: (877) SOS-FILE (767-3453)
www.sos.state.oh.us
Busserv@ros.state.oh.us

Expedite Fee forms (select one) Mail form to one of the following:	
<input checked="" type="radio"/> Expedite	PO Box 1390 Columbus, OH 43216 --- Resubmit at additional fee of \$100 ---
<input type="radio"/> Non Expedite	PO Box 1329 Columbus, OH 43216

CERTIFICATE OF MERGER
Filing Fee \$125
(154-MER)

In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings banks, savings and loan associations, limited liability companies, partnerships, limited partnerships and/or limited liability partnerships, desiring to effect a merger, set forth the following facts

I SURVIVING ENTITY

A. Name of the entity surviving the merger Jain (Americas) Inc.

B. Name Change: As a result of this merger, the name of the surviving entity has been changed to the following

(Complete only if name of surviving entity is changing through the merger)

C. The surviving entity is a (Please check the appropriate box and fill in the appropriate blanks)

Domestic (Ohio) For-Profit Corporation, charter number 1023077

Domestic (Ohio) Nonprofit Corporation, charter number _____

Foreign (Non-Ohio) For-Profit Corporation incorporated under the laws of the jurisdiction of _____ and licensed to transact business in the state of Ohio under license number _____

Foreign (Non-Ohio) For-Profit Corporation incorporated under the laws of the jurisdiction of _____ and NOT licensed to transact business in the state of Ohio

Foreign (Non-Ohio) Nonprofit Corporation under the laws of the jurisdiction of _____ and licensed to transact business in the state of Ohio under license number _____

Foreign (Non-Ohio) Nonprofit Corporation under the laws of the jurisdiction of _____ and NOT licensed to transact business in the state of Ohio

Domestic (Ohio) For-Profit Limited Liability Company, with registration number _____

Domestic (Ohio) Nonprofit Limited Liability Company, with registration number _____

Foreign (Non-Ohio) For-Profit Limited Liability Company organized under the laws of the jurisdiction of _____ registered to do business in the state of Ohio under registration number _____

Foreign (Non-Ohio) For-Profit Limited Liability Company organized under the laws of the jurisdiction of _____ and NOT registered to do business in the state of Ohio

2011 MAR 21 PM 2:21
 CLIENT SERVICE
 PROGRAM

- Foreign (Non-Ohio) Nonprofit Limited Liability Company organized under the laws of the jurisdiction of _____ and registered to do business in the state of Ohio under registration number _____
- Foreign (Non-Ohio) Nonprofit Limited Liability Company organized under the laws of the jurisdiction of _____ and NOT registered to do business in the State of Ohio
- Partnership, registration number, if any, _____
- Partnership NOT registered with the state of Ohio _____
- Domestic (Ohio) Limited Partnership, with registration number _____
- Foreign (Non-Ohio) Limited Partnership organized under the laws of the jurisdiction 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 jurisdiction of _____ and NOT registered to do business in the state of Ohio
- Domestic (Ohio) Limited Liability Partnership, with the registration number _____
- Foreign (Non-Ohio) Limited Liability Partnership organized under the laws of the jurisdiction of _____ and registered to do business in the state of Ohio under registration number _____
- Foreign (Non-Ohio) Limited Liability Partnership organized under the laws of the jurisdiction of _____ and NOT registered to do business in the state of Ohio

II **CONSTITUENT ENTITY**

Provide the name, charter/license/registration number, type of entity, jurisdiction of formation, for each entity merging out of existence. (If this is insufficient space to reflect all merging entities, please attach a separate sheet listing the additional merging entities)

Name	Charter, License, Registration, or Registration Number	Jurisdiction of Formation	Type of Entity
NuCedar Mills, Inc.	4082381	DE	Corporation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

III. **MERGER AGREEMENT ON FILE**

The name and mailing address of the person or entity from whom/which eligible persons may obtain a copy of the merger agreement upon written request

Murali Ramanathan	1819 Walcut Rd., Suite 1	
Name	Mailing Address	
Columbus	OH	43228
City	State	Zip Code

IV. **EFFECTIVE DATE OF MERGER** March 31, 2011
This merger is to be effective on _____ (The date specified must be on or after
the date of the 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**
Each constituent entity has complied with all of the laws under which it exists and the laws permit the merger. The agreement of merger is authorized on behalf of each constituent entity and each person who signed the certificate on behalf of each entity is authorized to do so

VI. **STATEMENT OF MERGER**
Upon filing this Certificate of Merger, or upon such later date as specified herein, the merging entity/entities listed herein shall merge into the listed surviving entity.

VII. **STATUTORY AGENT**
If the surviving entity is a foreign entity NOT licensed to transact business in Ohio, OR if the surviving entity is a domestic corporation, limited liability company, or limited partnership entity updating its agent information, provide the name and address of statutory agent upon whom any process, notice or demand may be served.

_____	_____
Name	Mailing Address
_____	_____
City	Ohio
	State

	Zip Code

VIII **ACCEPTANCE OF AGENT**
If the new entity is a domestic corporation, domestic limited liability company, partnership or domestic limited partnership, then the agent must accept appointment.

The undersigned, named herein as the statutory agent upon whom service of process against any constituent entity or the surviving entity may be served, hereby acknowledges and accepts the appointment of statutory agent.

Signature of Agent Date

If the agent is an individual using a P.O. Box, the agent must check this box to confirm that he or she is an Ohio resident

IX **AMENDMENTS**
In the case of a merger into a domestic corporation, limited liability company, or limited partnership, any amendments to the articles of incorporation, articles of organization, or certificate of limited partnership of the surviving domestic entity shall be filed with the certificate of merger.

Amendments are attached No Amendments

X **REQUIREMENTS OF CORPORATIONS MERGING OUT OF EXISTENCE**
If a domestic or foreign corporation licensed to transact business in Ohio is a constituent entity and the surviving or new entity resulting from the merger is not a domestic or foreign corporation that is to be licensed to transact business in Ohio, the certificate of merger must be accompanied by the affidavits, receipts, certificates, or other evidence required by division (H) of section 1701.86 and division (G) of section 1702.47 of the Revised Code with respect to each domestic corporation, and by the affidavits, receipts, certificates, or other evidence required by division (C) or (D) of section 1703.17 of the Revised Code with respect to each foreign constituent corporation licensed to transact business in Ohio.

XI **QUALIFICATION OR LICENSURE OF FOREIGN SURVIVING ENTITY**

- A. The surviving foreign entity desires to transact business in Ohio as a foreign corporation, bank, savings bank, savings and loan, limited liability company, partnership, limited partnership, or limited liability partnership, 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.

Name Mailing Address

City Ohio State Zip Code

- If the agent is an individual using a P.O. Box, check the box to confirm that the agent is an Ohio resident.

The surviving foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or limited liability partnership ("surviving entity") irrevocably consents to (1) service of process on the statutory agent listed above as long as authority of the agent continues, and (2) to service of process upon the Secretary of State of Ohio if the agent cannot be found. If the surviving entity fails to designate another agent, as required by Ohio law, the surviving entity's license or registration to do business in Ohio expires or is canceled.

- B. The qualifying entity also states as follows: (Complete only if applicable)

1. **Foreign Qualifying Corporation (Section 1703.04)**

(If the qualifying entity is a foreign corporation, the following information must be completed.)

- (a) Name of the corporation in its jurisdiction of formation

- (b) If the corporate name is not available, the trade name under which it will do business in Ohio

- (c) Location and complete address of its principal office

Mailing Address

City State Zip Code

- (d) Name of the county in which its principal office in Ohio, if any, is to be located

- (e) A brief summary of the corporate purpose to be exercised within Ohio

- (f) To procure a license to transact business in Ohio, a foreign corporation for-profit must file with the secretary of state a certificate of good standing or subsistence, dated not earlier than 90 days prior to the filing of the application, under the seal of the secretary of state, or other proper official, of the jurisdiction under the laws of which said corporation was incorporated, setting forth (1) the exact corporate title; (2) the date of incorporation, and (3) the fact that the corporation is in good standing or is a subsisting corporation.

2 Foreign Notice (Section 1703.031)

(If the qualifying entity is a foreign bank, savings bank, or savings and loan, the following information must be completed.)

(a) Name of the Foreign nationally/federally chartered bank, savings bank, or savings and loan association

(b) Any trade name(s) under which the corporation will conduct business in Ohio

(c) Location of the corporation's main office (Non-Ohio)

_____ Mailing Address

_____ City _____ State _____ Zip Code

(d) Principal office location in Ohio

_____ Mailing Address

_____ City _____ Ohio State _____ Zip Code

(If there will not be an office in Ohio, please state "None" on the form)

(e) The corporation will exercise the following purpose(s) in Ohio

3. Foreign Qualifying Limited Liability Company (Section 1705.54)

(If the qualifying entity is a foreign limited liability company, the following information must be completed.)

(a) Name of the For-Profit or Nonprofit limited liability company in its jurisdiction of formation

(b) Name under which the limited liability company desires to transact business in Ohio (if different from its name in its jurisdiction of formation)

(c) The limited liability company was formed on _____

Date

under the laws of the jurisdiction of _____

Jurisdiction

- (d) Address to which interested persons may direct requests for copies of the articles of organization, operating agreement, bylaws, or other charter documents of the company

Mailing Address

City State Zip Code

4. Foreign Qualifying Limited Partnership under section 1782.49

(If the qualifying entity is a foreign limited partnership, the following information must be completed)

(a) Name of the limited partnership _____

(b) The limited partnership was formed on _____
Date

Under the laws of the Jurisdiction of _____
Jurisdiction

(c) Address of the office of the limited partnership in its jurisdiction of formation

Mailing Address

City State Zip Code

(d) Address of the limited partnership's principal office

Mailing Address

City State Zip Code

(e) The names and business or residence addresses of the general partners of the partnership are as follows:

Name _____ Mailing Address _____

Name _____ Mailing Address _____

Name _____ Mailing Address _____

Name _____ Mailing Address _____

(Please attach additional separate sheet(s) listing other general partners and their addresses as needed)

- (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

Mailing Address

City State Zip Code

The limited partnership hereby certifies that it shall maintain such records until the registration of the limited partnership in Ohio is canceled or withdrawn

5. Foreign Qualifying Limited Liability Partnership (Section 1776.86) (if the qualifying entity is a foreign limited liability partnership, the following information must be completed.)

- (a) Name of the partnership

Name must include one of the following phrases or abbreviations: "registered limited liability partnership," "limited liability partnership," "R.L.L.P.," "L.L.P.," "RLLP," or "LLP."

- (b) The partnership was formed under the laws of the jurisdiction of _____

- (c) Address of the partnership's chief executive office

Mailing Address

City State Zip Code

- (d) If the chief executive office is not in Ohio, the address of any office of the partnership in Ohio, if one exists

Mailing Address

City Ohio State Zip Code

- (e) Foreign limited liability partnership must attach evidence of existence in its jurisdiction of formation (origin).

(Proceed to page 8 for signatures of authorized officers, partners and representatives.)

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

Exact name of entity Jain (Americas) Inc.
By: _____
Signature
Its: EXECUTIVE VICE PRESIDENT
Title
Date: 3/31/11

Exact name of entity NuCedar Mills, Inc.
By: _____
Signature
Its: SECRETARY / TREASURER
Title
Date: 3/31/11

Exact name of entity
By: _____
Signature
Its: _____
Title
Date: _____

Exact name of entity
By: _____
Signature
Its: _____
Title
Date: _____

Exact name of entity
By: _____
Signature
Its: _____
Title
Date: _____

An authorized representative of each constituent corporation, partnership, or entity must sign the merger certificate (ORC 1701.81(A), 1702.43 (A), 1705.38(A), 1776.70(A), 1782.433(A)).