

PATENT ASSIGNMENT

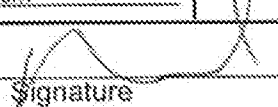
Electronic Version v1.1
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SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	Conversion of Entity
CONVEYING PARTY DATA	
Name	Execution Date
Arminak & Associates, Inc.	02/13/2012
RECEIVING PARTY DATA	
Name:	Arminak & Associates, LLC
Street Address:	1350 Mountain View Circle
City:	Azusa
State/Country:	CALIFORNIA
Postal Code:	91702
PROPERTY NUMBERS Total: 1	
Property Type	Number
Patent Number:	D653947
CORRESPONDENCE DATA	
Fax Number:	(310)394-4477
Phone:	(310) 451-0647
Email:	pat@cislo.com, kbrown@cislo.com
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>	
Correspondent Name:	Daniel M. Cislo
Address Line 1:	1333 2nd Street, Suite 500
Address Line 4:	Santa Monica, CALIFORNIA 90401
ATTORNEY DOCKET NUMBER:	11-24886
NAME OF SUBMITTER:	Daniel M. Cislo
Total Attachments: 3 source=AAConversionInctoLLC#page1.tif source=AAConversionInctoLLC#page2.tif source=AAConversionInctoLLC#page3.tif	

CH \$40.00 D653947

RECORDATION FORM COVER SHEET
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) Arminak & Associates, Inc. Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No		2. Name and address of receiving party(ies) Name: <u>Arminak & Associates, LLC</u> Internal Address: _____ _____ Street Address: <u>1350 Mountain View Circle</u> _____ City: <u>Azusa</u> State: <u>California</u> Country: <u>United States</u> Zip: <u>91702</u> Additional name(s) & address(es) attached? ☐ Yes ☒ No	
3. Nature of conveyance/Execution Date(s): Execution Date(s) <u>02/13/2012</u> ☐ Assignment ☐ Merger ☐ Security Agreement ☐ Change of Name ☐ Joint Research Agreement ☐ Government Interest Assignment ☐ Executive Order 9424, Confirmatory License ☒ Other <u>Conversion of Entity</u>		4. Application or patent number(s): ☐ This document is being filed together with a new application. A. Patent Application No.(s) _____ B. Patent No.(s) _____ <u>0653,947</u> Additional numbers attached? ☐ Yes ☒ No	
5. Name and address to whom correspondence concerning document should be mailed: Name: <u>Daniel M. Cislo</u> Internal Address: _____ _____ Street Address: <u>1333 2nd Street</u> _____ City: <u>Santa Monica</u> State: <u>California</u> Zip: <u>90401</u> Phone Number: <u>(310) 451-0647</u> Fax Number: <u>(310) 394-4477</u> Email Address: <u>dancislo@cislo.com; pat@cislo.com</u>		6. Total number of applications and patents involved: <u>1</u> 7. Total fee (37 CFR 1.21(h) & 3.41) \$ <u>40.00</u> ☒ Authorized to be charged to deposit account ☐ Enclosed ☐ None required (government interest not affecting title) 8. Payment Information Deposit Account Number <u>93-2030</u> Authorized User Name <u>Daniel M. Cislo</u>	
9. Signature:  _____ Daniel M. Cislo Name of Person Signing		_____ June 13, 2012 Date Total number of pages including cover sheet, attachments, and documents: 3	

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

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201204410115



State of California Secretary of State

LLC-1A

File #

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

FEB 13 2012

Limited Liability Company Articles of Organization - Conversion

IMPORTANT — Read all instructions before completing this form.

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Converted Entity Information

1. NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," or the abbreviations "LLC" or "L.L.C." The words "Limited" and "Company" may be abbreviated to "Ltd." and "Co.," respectively.)
Arminak & Associates, 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 SEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.
 3. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (Check only one)
☐ ONE MANAGER ☐ MORE THAN ONE MANAGER ☒ ALL LIMITED LIABILITY COMPANY MEMBER(S)
 4. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE
 1350 MOUNTAIN VIEW CIR CITY: AZUSA STATE: CA ZIP CODE: 91702
 5. NAME OF AGENT FOR SERVICE OF PROCESS (Item 5: Enter the name of the agent for service of process. The agent may be an individual residing in California or a corporation that has filed a certificate pursuant to California Corporations Code section 1505. Item 6: If the agent is an individual, enter the agent's business or residential address in California. Item 7: If the converting entity is a California limited partnership, enter the mailing address of the individual or corporate agent. Check the box and omit the mailing address if the agent's mailing address is the same as the address in item 6.)
Helga Arminak
 6. IF AN INDIVIDUAL, ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA
 1350 MOUNTAIN VIEW CIR CITY: AZUSA STATE: CA ZIP CODE: 91702
 7. MAILING ADDRESS OF AGENT FOR SERVICE OF PROCESS
 CITY: STATE: ZIP CODE:
- ☒ THE MAILING ADDRESS OF THE AGENT FOR SERVICE OF PROCESS IS THE SAME AS THE AGENT'S BUSINESS OR RESIDENTIAL ADDRESS IN ITEM 6.

Converting Entity Information

8. NAME OF CONVERTING ENTITY
Arminak & Associates Inc.
9. FORM OF ENTITY
Corporation
10. JURISDICTION
California
11. CA SECRETARY OF STATE FILE NUMBER, IF ANY
C2305735
12. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS:
 STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS
 Capital Stock - 30,000 Outstanding Shares Greater than 50%

Additional Information

13. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.
14. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

February 13, 2012

DATE

SIGNATURE OF AUTHORIZED PERSON

Helga Arminak, President

TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

SIGNATURE OF AUTHORIZED PERSON

Roger Abadjian, Secretary

TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

LLC-1A (REV 04/2010)

APPROVED BY SECRETARY OF STATE

PATENT
REEL: 028374 FRAME: 0524

01113825



I hereby certify that the foregoing
transcript of 1 page(s)
is a full, true and correct copy of the
original record in the custody of the
California Secretary of State's office.

FEB 13 2012

Date: _____


DEBRA BOWEN, Secretary of State