## PATENT ASSIGNMENT

# Electronic Version v1.1 Stylesheet Version v1.1

SUBMISSION TYPE:			NEW ASSIGNMENT				
NATURE OF CONVEYANCE:			CHANGE OF NAME				
CONVEYING PARTY	DATA						
		N	lame	Execution Date			
DePuy Mitek, Inc.				06/13/2012			
RECEIVING PARTY D	ΑΤΑ						
Name:							
Street Address:	325 Paramou	unt Driv	/e				
City:	Raynham						
State/Country:	MASSACHU	SETTS	3				
Postal Code:	02767						
PROPERTY NUMBER	RS Total: 2						
Property Type			Number				
Application Number:		13220	13220917				
Application Number:		12871	189				
CORRESPONDENCE	DATA						
Fax Number:	732524	2808					
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.							
Phone:	732524						
Email: jnjuspatent@corus.jnj.com							
Correspondent Name: Philip S. Johnson							
Address Line 1:One Johnson & Johnson PlazaAddress Line 4:New Brunswick, NEW JERSEY 02767							
ATTORNEY DOCKET NUMBER:			MIT5125				
NAME OF SUBMITTE	R:		Angelina Petti				
Signature:			/Angelina Petti/				
Date:			05/03/2013				
				PATENT			

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P	<b>C</b>		Wi	liam Francis Galvin			
	U	Or	Secretar	y of the Commonwealth c. Boston, Massachusetts 0210	10 1517		
		¢,	IC ISSUED LINE	e, Boston, Massachusetts QZIC	<b>10-1</b> )12		
	FORMM	UST BE TYPED	Articles of	Entity Conversion of a	FORM MUST BE		
			Domestic B	usiness Corporation to a			
				estic Other Entity	_		
		(Gen	eral Laws Chapter	156D, Section 9.53, 950 CMR	t 11 <b>3.2</b> 9)		
	(1) Exact p	ame of corporation pri	or to conversion: <u>Del</u>	Puy Mitek, Inc.			
	· .						
	(2) Register	ed office address; <u>o/o_C1</u>	Corporation System	n, 155 Federal Street, Suite 700, Bo ben street, city or town, state, sip code,	oston, MA 02110		
	· · · · · · · · · · · · · · · · · · ·		(num)	ber, street, city or town, state, zip code,	)		
	(3) New na	me after conversion, w	hich shall satisfy the c	erganic law of the surviving entity:			
	DePuj	Mitek, LLC					
	(d) New con	- of an imited list	ility company				
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	(5) The olan	of entity conversion w	as duly approved by r	he shareholders, and where required	here the separate voting group	an In the	•••
	manner	required by G.L. Chap	ter 156D and the art	icles of organization,	, ))		
			staining all informatio	on required to be set forth in the pu	blic organic document of the	surviv-	
	ing entit	y.					
		$\sim$					
	(7) The com	cision of the corporate	on shall be effective at	the time and on the date approved	by the Division, unless a late	r effec-	
	tive date	is specified in apporda	ice with the organic li	aw of the surviving entity:4	pm, June 12, 20	14.	
		$\sim$		¥ ¥			
	Signed by: _			Ian Lawson (nature of authorized individual)	······································	)	
	(Please c	heck appropriate box)	(រារ្	ааныс ој антотисти такчицију			
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	🔯 Pre.	sident,					
	D Od	ier officer,					
		irt-appointed fiduciary	l				
		nt-appointed inducially					
					2012		
		13 th	day ofJ	<u>une</u>	2012		
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•			day ofJ	<u>une</u>	; <mark>2012</mark>		
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PATENT REEL: 030344 FRAME: 0326

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# The Commonwealth of Massachusetts William Francis Galvin

Secretary of the Commonwealth One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

#### Limited Liability Company Certificate of Organization (General Laws Chapter 156C, Soction 12)

Federal Identification No.: \_\_\_\_

 The exact name of the limited liability company: DePuy Mitek, LLC

(2) The street address of the office in the commonwealth at which its records will be maintained: 325 Paramount Drive, Raynham, MA 02767

(3) The general character of the business:

To manufacture, sell and develop medical devices used in sports medicine and to carry on any business or other activity which may be lawfully carried on by a limited liability company under the Massachusetts Limited Liability Company Act.

(6) Latest date of dissolution, if specified:\_

(5) The name and street address, of the resident agent in the commonwealth:
NAME ADDRESS
C T Corporation System 155 Federal Street, Suite 700,

Boston, Massachusetts 02110

·····

(6) The name and business address, if different from office location, of each manager, if any: NAME ADDRESS

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(7) The name and business address, if different from office location, of each person in addition to manager(s) authorized to execute documents filed with the Corporations Division, and at least one person shall be named if there are no managers: NAME ADDRESS Ian Lawson 325 Paramount Drive Raynham, MA 02767 (8) The name and business address, if different from office location, of each person authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in seal property recorded with a registry of deeds or district office of the land court: ADDRESS NAME 325 Paramount Drive Ian Lawson Raynham, MA 02767 .. . .... . . . . . . . (9) Additional matters: Signed by (by at least one authorized signatory): . Ian Lawson Consent of resident agent: Michael Malkowski I CT Corporation System resident agent of the above limited liability company, consent to my appointment as resident agent pursuant to GL, c 156C § 12\* and a first second s "or attach resident agent's consent hereto. MA054 - (0/13/2011 C T System Online

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## THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

June 13, 2012 03:02 PM

Hettian Frainfalie

#### WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

**RECORDED: 05/03/2013**