

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT2707867

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
DEPUY ACROMED, INC.	09/19/2003
RECEIVING PARTY DATA	
Name:	DEPUY SPINE, INC.
Street Address:	325 PARAMOUNT DRIVE
City:	RAYNHAM
State/Country:	MASSACHUSETTS
Postal Code:	02767
PROPERTY NUMBERS Total: 2	
Property Type	Number
Patent Number:	6478800
Patent Number:	6755841
CORRESPONDENCE DATA	
Fax Number:	
Email:	efs@nutter.com
<i>Correspondence will be sent via US Mail when the email attempt is unsuccessful.</i>	
Correspondent Name:	NUTTER MCCLENNEN & FISH LLP
Address Line 1:	155 SEAPORT BOULEVARD
Address Line 4:	BOSTON, MASSACHUSETTS 02210
ATTORNEY DOCKET NUMBER:	101896-1239 (DEP0329REI1)
NAME OF SUBMITTER:	LISA ADAMS
Signature:	/Lisa Adams/
Date:	01/31/2014
Total Attachments: 3 source=Acromed_to_Spine_Inc#page1.tif source=Acromed_to_Spine_Inc#page2.tif source=Acromed_to_Spine_Inc#page3.tif	



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
10/03/2003	200327600246	DOMESTIC/AMENDMENT TO ARTICLES (AMD)	50.00	100.00	.00	20.00	.00

Receipt

This is not a bill. Please do not remit payment.

C.T. CORPORATION SYSTEM
17 S. HIGH STREET
COLUMBUS, OH 43215

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

614043

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

DEPUY SPINE, INC.

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

Document(s)

DOMESTIC/AMENDMENT TO ARTICLES

Document No(s):

200327600246



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 1st day of October, A.D.
2003.

J. Kenneth Blackwell
Ohio Secretary of State



Prescribed by **J. Kenneth Blackwell**

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

www.state.oh.us/sos

e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following:

☐ Yes PO Box 1390
Columbus, OH 43216

*** Requires an additional fee of \$100 ***

☐ No PO Box 1028
Columbus, OH 43216

Certificate of Amendment by Shareholders or Members

(Domestic)

Filing Fee \$50.00

(CHECK ONLY ONE (1) BOX)

(1) Domestic for Profit		(2) Domestic Non-Profit	
<input type="checkbox"/> Amended (122-AMAP)	<input checked="" type="checkbox"/> Amendment (125-AMDS)	<input type="checkbox"/> Amended (126-AMAN)	<input type="checkbox"/> Amendment (128-AMD)

Complete the general information in this section for the box checked above.

Name of Corporation DePuy AcroMed, Inc.

Charter Number 614043

Name of Officer C. W. Smith

Title Vice President, Law

☒ Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

☐ A meeting of the ☐ shareholders ☐ members was duly called and held on

(Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise _____ % as the voting power of the corporation.

☒ In a writing signed by all of the ☒ shareholders ☐ members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

Clause applies if amended box is checked.

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

All of the following information must be completed if an amended box is checked.
If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: DePuy Spine, Inc.

SECOND: The place in the State of Ohio where its principal office is located is in the City of:

(city, village or township)

(county)

THIRD: The purposes of the corporation are as follows:

FOURTH: The number of shares which the corporation is authorized to have outstanding is: _____
(Does not apply to box (2))

Other: This amendment shall become effective on October 1, 2003.

REQUIRED
Must be authenticated
(signed) by an authorized
representative
(See Instructions)

Catherine W. Smith

Authorized Representative
C. W. Smith, Vice President, Law

9/19/03

Date

Authorized Representative

Date

Authorized Representative

Date