

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT2889091

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
INTERPORE SPINE LTD.	05/16/2014
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	INTERPORE SPINE,LLC
<b>Street Address:</b>	181 TECHNOLOGY DRIVE
<b>City:</b>	IRVINE
<b>State/Country:</b>	CALIFORNIA
<b>Postal Code:</b>	92618
<b>PROPERTY NUMBERS Total: 2</b>	
<b>Property Type</b>	<b>Number</b>
<b>Application Number:</b>	11746204
<b>Application Number:</b>	12899079
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(248)341-1073
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>	
<b>Phone:</b>	2486411600
<b>Email:</b>	rmills@hdp.com
<b>Correspondent Name:</b>	STEPHEN J. FOSS
<b>Address Line 1:</b>	5445 CORPORATE DRIVE
<b>Address Line 2:</b>	STE. 200
<b>Address Line 4:</b>	TROY, MICHIGAN 48098-2683
<b>NAME OF SUBMITTER:</b>	STEPHEN J. FOSS
<b>SIGNATURE:</b>	/StephenJFoss/
<b>DATE SIGNED:</b>	06/09/2014
<b>Total Attachments: 2</b>	
source=Name Change (Interpore Spine Ltd. to Interpore Spine_ LLC).05-16-2014#page1.tif	
source=Name Change (Interpore Spine Ltd. to Interpore Spine_ LLC).05-16-2014#page2.tif	

STATE OF DELAWARE  
CERTIFICATE OF CONVERSION  
FROM A CORPORATION TO A  
LIMITED LIABILITY COMPANY PURSUANT TO  
SECTION 18-214 OF THE LIMITED LIABILITY ACT

- 1.) The jurisdiction where the Corporation first formed is Delaware.
- 2.) The jurisdiction immediately prior to filing this Certificate is Delaware.
- 3.) The date the corporation first formed is March 26, 1998.
- 4.) The name of the Corporation immediately prior to filing this Certificate is  
Interpore Spine Ltd.
- 5.) The name of the Limited Liability Company as set forth in the Certificate of  
Formation is Interpore Spine, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the  
16th day of May, A.D. 2014.

By:   
Authorized Person

Name: Bradley J. Tandy  
Print or Type

STATE of DELAWARE  
LIMITED LIABILITY COMPANY  
CERTIFICATE of FORMATION

• First: The name of the limited liability company is Interpore Spine, LLC

• Second: The address of its registered office in the State of Delaware is  
3411 Silverside Road #104 in the City of Wilmington  
Zip Code 19810.

The name of its Registered agent at such address is Corporate Creations  
Network, Inc.

• Third: (Insert any other matters the members determine to include herein.)

In Witness Whereof, the undersigned have executed this Certificate of Formation this  
16th day of May, 2014.

By:   
Authorized Person(s)

Name: Bradley J. Tandy  
Typed or Printed