

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT3264270

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	CHANGE OF NAME	
CONVEYING PARTY DATA		
	Name	Execution Date
	AESCLAP IMPLANT SYSTEMS, INC.	10/01/2009
RECEIVING PARTY DATA		
Name:	AESCLAP IMPLANT SYSTEMS, LLC	
Street Address:	3773 CORPORATE PARKWAY	
City:	CENTER VALLEY	
State/Country:	PENNSYLVANIA	
Postal Code:	18034	
PROPERTY NUMBERS Total: 1		
	Property Type	Number
	Application Number:	12321099
CORRESPONDENCE DATA		
Fax Number:	(610)407-0701	
<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>		
Phone:	610-407-0700	
Email:	ephelan@ratnerprestia.com	
Correspondent Name:	RATNERPRESTIA	
Address Line 1:	1235 WESTLAKES DRIVE, SUITE 301	
Address Line 4:	BERWYN, PENNSYLVANIA 19312	
ATTORNEY DOCKET NUMBER:	BBM-216US	
NAME OF SUBMITTER:	CHRISTOPHER A. ROTHE	
SIGNATURE:	/Christopher A. Rothe/	
DATE SIGNED:	03/13/2015	
Total Attachments: 4		
source=changeofname#page1.tif		
source=changeofname#page2.tif		
source=changeofname#page3.tif		
source=changeofname#page4.tif		

Delaware

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The First State

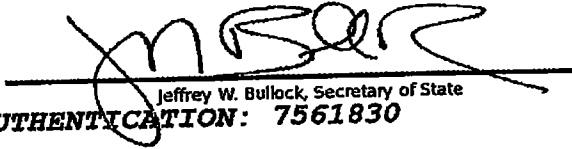
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE CORPORATION UNDER THE NAME OF "AESCULAP IMPLANT SYSTEMS, INC." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "AESCULAP IMPLANT SYSTEMS, INC." TO "AESCULAP IMPLANT SYSTEMS, LLC", FILED IN THIS OFFICE ON THE FIRST DAY OF OCTOBER, A.D. 2009, AT 4:32 O'CLOCK P.M.

3917902 8100V

090902753

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7561830

DATE: 10-02-09

PATENT
REEL: 035202 FRAME: 0158

Delaware

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The First State

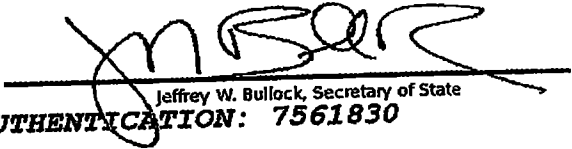
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF CERTIFICATE OF FORMATION OF "AESCULAP IMPLANT SYSTEMS, LLC" FILED IN THIS OFFICE ON THE FIRST DAY OF OCTOBER, A.D. 2009, AT 4:32 O'CLOCK P.M.

3917902 8100V

090902753

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7561830

DATE: 10-02-09

PATENT
REEL: 035202 FRAME: 0159

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 January 27, 2005.
- 4.) The name of the Corporation immediately prior to filing this Certificate is
Aesculap Implant Systems, Inc.
- 5.) The name of the Limited Liability Company as set forth in the Certificate of
Formation is Aesculap Implant Systems, LLC
- 6.) The effective date of the conversion from a Corporation to a Limited Liability
Company is October 1, 2009

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the
1st day of October, A.D. 2009.

By: Scarlett Spencer
Authorized Person

Name: Scarlett Spencer
Print of Type

STATE of DELAWARE
LIMITED LIABILITY COMPANY
CERTIFICATE of FORMATION

• First: The name of the limited liability company is _____
Aesculap Implant Systems, LLC

• Second: The address of its registered office in the State of Delaware is
2711 Centerville Rd., 400 in the City of Wilmington
Zip Code 19808

The name of its Registered agent at such address is _____
Corporation Service Company

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

Effective date October 1, 2009

In Witness Whereof, the undersigned have executed this Certificate of Formation this
1st day of October, 2009.

By: Scarlett Spence
Authorized Person(s)

Name: Scarlett Spence
Typed or Printed