

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT3563260

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	STATEMENT OF CONVERSION
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
GREYDON, INC.	09/10/2015
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	GREYDON LLC
<b>Street Address:</b>	391 GREENDALE ROAD
<b>City:</b>	YORK
<b>State/Country:</b>	PENNSYLVANIA
<b>Postal Code:</b>	17403
<b>PROPERTY NUMBERS Total: 8</b>	
<b>Property Type</b>	<b>Number</b>
Patent Number:	6837023
Patent Number:	7243475
Patent Number:	7392634
Patent Number:	7328540
Patent Number:	6644185
Patent Number:	6834588
Patent Number:	6993885
Patent Number:	7942095
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(937)443-6635
<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>Email:</b>	ipdocket@thompsonhine.com
<b>Correspondent Name:</b>	THOMPSON HINE LLP
<b>Address Line 1:</b>	10050 INNOVATION DRIVE, SUITE 400
<b>Address Line 4:</b>	DAYTON, OHIO 45342
<b>ATTORNEY DOCKET NUMBER:</b>	070117/CONVERSION/LD
<b>NAME OF SUBMITTER:</b>	MICHAEL J. NIEBERDING
<b>SIGNATURE:</b>	/MICHAEL J. NIEBERDING/
<b>DATE SIGNED:</b>	10/09/2015

**Total Attachments: 6**

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COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

10/07/2015

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

Greydon LLC

I, Pedro A. Cortés , Secretary of the Commonwealth of Pennsylvania do hereby certify that the foregoing and annexed is a true and correct photocopy of

Amendment filed on Sep 10, 2015 - Pages (5)



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written


*Pedro A. Cortés*  
Secretary of the commonwealth

Certification Number: TSC151007130818-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>

**PATENT**  
**REEL: 036826 FRAME: 0587**

PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

<input type="checkbox"/> Return document by mail to:  cis-ctharrisburgfulfillment @wolterskluwer.com 9688039 SOPA 1  <input type="checkbox"/> Return document by email to:	Statement of Conversion DSRB:4344  TML150919DB0173
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Read all instructions prior to

Fee: \$70

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 355 (relating to Statement of conversion), the undersigned association, desiring to effect a conversion, hereby states that:

A. For the converting association:

1. The name of the converting association is: Greydon, Inc.

2. The jurisdiction of formation of the converting association is: Pennsylvania

3. The type of association is (check only one):

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Business Corporation | <input type="checkbox"/> Limited Partnership                     | <input type="checkbox"/> Business Trust           |
| <input type="checkbox"/> Nonprofit Corporation           | <input type="checkbox"/> Limited Liability (General) Partnership | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Limited Liability Company       | <input type="checkbox"/> Limited Liability Limited Partnership   | <input type="checkbox"/> Other _____              |

4. Date on which the association was created, incorporated, formed or otherwise came into existence:

12/14/1992  
(MM/DD/YYYY)

5. If the converting association is a domestic filing association (a Pennsylvania business corporation, nonprofit corporation, limited partnership, limited liability company, professional association or business trust), the statute under which it was first created, incorporated, formed or otherwise came into existence:

Business Corporation Law of 1988  
(ex. Business Corporation Law of 1988, Limited Liability Company Law of 1994, etc.)

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Dept. of State

SEP 10 2015

DSCB:15-355-2

6. Check and complete one of the following addresses for the converting association.

If the converting association is a domestic filing association, domestic limited liability partnership or registered foreign association, the current registered office address as on file with the Department of State. Complete part (a) OR (b) - not both:				
<input checked="" type="checkbox"/>	(a) 391 Grendale Road	York	PA	17403 York
	Number and street	City	State	Zip County
	(b) c/o: _____			County
	Name of Commercial Registered Office Provider			
If the converting association is a domestic association that is <i>not</i> a domestic filing association or limited liability partnership, the address, including street and number, if any, of its principal office:				
<input type="checkbox"/>	_____	_____	_____	_____
	Number and street	City	State	Zip County
If the converting association is a nonregistered foreign association, the address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office:				
<input type="checkbox"/>	_____	_____	_____	_____
	Number and street	City	State	Zip

**B. For the converted association:**

- The name of the converted association is: Greydon LLC
- The jurisdiction of formation of the converted association is: Pennsylvania
- The type of association is (check only one):
 

<input type="checkbox"/> Business Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Business Trust
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> Limited Liability (General) Partnership	<input type="checkbox"/> Professional Association
<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Limited Liability Limited Partnership	<input type="checkbox"/> Other _____

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DSCB:15-355-3

4. Check and complete one of the following addresses for the converted association.

<input type="checkbox"/>	If the converted association is a domestic filing association, domestic limited liability partnership or registered foreign association, its registered office address. Complete part (a) OR (b) - not both:				
	(a)	Number and street	City	State	Zip County
<input type="checkbox"/>	If the converted association is a domestic association that is not a domestic filing association or limited liability partnership, the address, including street and number, if any, of its principal office:				
	(b) c/o:	Corporation Service Company			Dauphin County
<input type="checkbox"/>	If the converted association is a nonregistered foreign association, complete both (1) and (2):				
	(1)	The address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation, or if it is not required to maintain a registered or similar office, its principal office address:			
<input type="checkbox"/>	(2) The name and address, including street and number, of its registered agent:				
		Name of Registered Agent			

C. Effective date of statement of conversion (check, and if appropriate complete, one of the following):

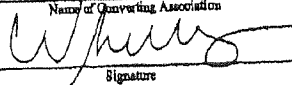
- This Statement of Conversion shall be effective upon filing in the Department of State.
- This Statement of Conversion shall be effective on: \_\_\_\_\_ at \_\_\_\_\_

D. Approval of conversion by converting association (check only one):

- For converting association that is a domestic entity - The plan of conversion was approved in accordance with 15 Pa.C.S. Chapter 3, Subchapter B (relating to conversion).
- For converting association that is a foreign association - The conversion was approved in accordance with the law of the jurisdiction of formation of the converting association.

E. Attachments (see Instructions for required and optional attachments).

IN TESTIMONY WHEREOF, the undersigned converting association has caused this Statement of Conversion to be signed by a duly authorized officer thereof this 9th day of September, 2015

Graydon, Inc.  
 \_\_\_\_\_  
 Name of Converting Association  
  
 \_\_\_\_\_  
 Signature  
 Secretary and Treasurer  
 \_\_\_\_\_  
 Title

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PENNSYLVANIA DEPARTMENT OF STATE  
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Certificate of Organization  
Domestic Limited Liability Company  
(15 Pa.C.S. § 8913)

Name	cls-ctharrisburgfulfillment @wolterskluwer.com 9688039 SOPA 3
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Document will be returned to the name and address you enter to the left.

Fee: \$125

In compliance with the requirements of 15 Pa.C.S. § 8913 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company (designator is required, i.e., "company", "limited" or "limited liability company" or abbreviation): GREYDON LLC
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2. The (a) address of the limited liability company's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:				
(a) Number and Street	City	State	Zip	County
(b) Name of Commercial Registered Office Provider				County
Corporation Service Company				Dauphin County

3. The name and address, including street and number, if any, of each organizer is (all organizers must sign on page 2):	
Name	Address
William M. Schult,	6279 Tri-Ridge Blvd., Suite 410, Loveland, OH 45140

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