

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT4060800

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CONVERTED
CONVEYING PARTY DATA	
Name	Execution Date
EDGE SYSTEMS CORPORATION	11/27/2012
RECEIVING PARTY DATA	
Name:	EDGE SYSTEMS LLC
Street Address:	2277 REDONDO AVENUE
City:	SIGNAL HILL
State/Country:	CALIFORNIA
Postal Code:	90755
PROPERTY NUMBERS Total: 5	
Property Type	Number
Application Number:	13267554
Application Number:	14698673
Application Number:	14698713
Application Number:	14700789
Patent Number:	8048089
CORRESPONDENCE DATA	
Fax Number:	(949)760-9502
<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:	9497600404
Email:	efiling@knobbe.com
Correspondent Name:	KNOBBE MARTENS OLSON & BEAR LLP
Address Line 1:	2040 MAIN ST
Address Line 2:	14TH FLOOR
Address Line 4:	IRVINE, CALIFORNIA 92614
ATTORNEY DOCKET NUMBER:	EDGE.005A/C1/C2/C3/C4
NAME OF SUBMITTER:	THEODORE G. PAPAGIANNIS
SIGNATURE:	/Theodore G. Papagiannis/
DATE SIGNED:	09/20/2016
Total Attachments: 2	

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State of California Secretary of State

LLC-1A File #

Limited Liability Company Articles of Organization - Conversion

ENDORSED - FILED in the office of the Secretary of State of the State of California

NOV 28 2012

IMPORTANT - Read all instructions before completing this form.

This Space For Filing Use Only

Converted Entity Information

1. NAME OF LIMITED LIABILITY COMPANY (End the name with the words "Limited Liability Company," or the abbreviations "LLC" or "L.L.C." The words "Limited" and "Company" may be abbreviated to "Ltd." and "Co.," respectively.)

Edge Systems LLC

2. THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT.

3. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY (Check only one)

[X] ONE MANAGER [] MORE THAN ONE MANAGER [] ALL LIMITED LIABILITY COMPANY MEMBER(S)

4. MAILING ADDRESS OF THE CHIEF EXECUTIVE OFFICE CITY STATE ZIP CODE 2277 Redondo Avenue Signal Hill CA 90755

5. NAME OF AGENT FOR SERVICE OF PROCESS (Item 5: Enter the name of the agent for service of process. The agent may be an individual residing in California or a corporation that has filed a certificate pursuant to California Corporations Code section 1505. Item 6: If the agent is an individual, enter the agent's business or residential address in California. Item 7: If the converting entity is a California limited partnership, enter the mailing address of the individual or corporate agent. Check the box and omit the mailing address if the agent's mailing address is the same as the address in Item 6.)

Roger G. Ignon

6. IF AN INDIVIDUAL, ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CA CITY STATE ZIP CODE 2277 Redondo Avenue Signal Hill CA 90755

7. MAILING ADDRESS OF AGENT FOR SERVICE OF PROCESS CITY STATE ZIP CODE

[X] THE MAILING ADDRESS OF THE AGENT FOR SERVICE OF PROCESS IS THE SAME AS THE AGENT'S BUSINESS OR RESIDENTIAL ADDRESS IN ITEM 6.

Converting Entity Information

8. NAME OF CONVERTING ENTITY Edge Systems Corporation

9. FORM OF ENTITY Corporation 10. JURISDICTION California 11. CA SECRETARY OF STATE FILE NUMBER, IF ANY 2055825

12. THE PRINCIPAL TERMS OF THE PLAN OF CONVERSION WERE APPROVED BY A VOTE OF THE NUMBER OF INTERESTS OR SHARES OF EACH CLASS THAT EQUALED OR EXCEEDED THE VOTE REQUIRED. IF A VOTE WAS REQUIRED, PROVIDE THE FOLLOWING FOR EACH CLASS:

STATE THE CLASS AND NUMBER OF OUTSTANDING INTERESTS ENTITLED TO VOTE AND THE PERCENTAGE VOTE REQUIRED OF EACH CLASS Common Stock 30,000 shares outstanding 51%

Additional Information

13. ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AND MADE A PART OF THIS CERTIFICATE.

14. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT OF MY OWN KNOWLEDGE. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED.

November 27, 2012 DATE

[Signature] SIGNATURE OF AUTHORIZED PERSON

William Cohen, President TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

[Signature] SIGNATURE OF AUTHORIZED PERSON

Roger Ignon, Assistant Secretary TYPE OR PRINT NAME AND TITLE OF AUTHORIZED PERSON

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I hereby certify that the foregoing transcript of _____ page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

DEC 08 2012

Date: _____ *PS*

Debra Bowen
DEBRA BOWEN, Secretary of State

PATENT