PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4276066

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME

CONVEYING PARTY DATA

Name	Execution Date
TECHNOLOGY RESEARCH CORPORATION	03/24/2014

RECEIVING PARTY DATA

Name:	TECHNOLOGY RESEARCH, LLC	
Street Address:	4525 140TH AVENUE NORTH	
Internal Address:	SUITE 900	
City:	CLEARWATER	
State/Country:	FLORIDA	
Postal Code:	33762	

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	15425767

CORRESPONDENCE DATA

Fax Number: (404)881-7777

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.

Phone: 4048817000

Email: melissa.mitchell@alston.com

Correspondent Name: ALSTON & BIRD LLP

Address Line 1: 1201 WEST PEACHTREE STREET

Address Line 2: ONE ATLANTIC CENTER
Address Line 4: ATLANTA, GEORGIA 30309

ATTORNEY DOCKET NUMBER:	018092/492650
NAME OF SUBMITTER:	CHRISTOPHER B. KELLY
SIGNATURE:	/Christopher B. Kelly/
DATE SIGNED:	02/15/2017

Total Attachments: 6

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ACCOUNT NO. : I2000000195

REFERENCE : (058486 433825

AUTHORIZATION :

COST LIMIT : \$ 180.00

ORDER DATE: March 19, 2014

ORDER TIME : 10:22 AM

ORDER NO. : 058486-010

CUSTOMER NO: 4338256

DOMESTIC AMENDMENT FILING

NAME: TECHNOLOGY RESEARCH

CORPORATION

EFFECTIVE DATE:

XX CERTIFICATE OF CONVERSION ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER'S INITIALS:

FILED
2014 MAR 24 M 9 57
TATELAHASSEE FLORIF

Certificate of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

Statutes.	
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Converse Technology Research Corporation	sion is
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of Florida	
6/3/1981 (Ellief state, of it a non-o.s. entity, the bathe of the country	y)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organiza	ation:
Technology Research, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after to date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date in the attached Articles of Organization, if an effective date is listed therein.)	
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.	

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FILED.

2014 MAR 24 AM 9-67

TALLAHASSEE, FLORIDA

20 14 Ź4th Signed this day of March Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: _ Title: Secretary and Authorized Person Printed Name: Floyd W. Smith Signature(s) on behalf of Other Business Entity: [See below for required signature(s).] Signature: Title: Secretary and Director Printed Name: Floyd W. Smith Signature: _ Title: _ Printed Name:___ Signature: Printed Name: Signature: Title: ___ Printed Name: Signature: Title: _ Printed Name: Printed Name:____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

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2014 MAR 24 AM 9: 67

ALLAMASSEE PLOSIS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

774	WILLIAM OF CHARMINES	DOTT-ON DOTTON DOTTON DOTTON DE LA DESCRICTA D	KLLA)
ARTICLE I - Name	:		
	ited Liability Company is		
>			
Technology Resea	rch, LLC		
	(Must end with the words	s "Limited Liability Company, "L.L.C.," or	"LI,C.")
ARTICLE II - Adde	****		
		rincipal office of the Limited Liability Con	ipany is:
Principal Office Add	iress:	Mailing Address:	
4525 140th Avenue	North, Suite 900	1530 Shields Drive	
Clearwater, FL 337	62.	Waukegan, IL 60085	
. 			·
ARTICLE III - Regi	stered Agent, Registered	d Office, & Registered Agent's Signature	:
(The Limited Liability	Company cannot serve a	is its own Registered Agent. You must desig	
another business entit	iy, with an active Florida r	registration.)	
The name and the Flor	rids street address of the o	registered agent are:	
	Corporation Service	Company	
	Corporation Convide	Name	
	1201 Hays Street		
	Florida street address ((P.O. Box NOT acceptable)	
	Talialiassee	FL 32301	•
	City	Zip	
the place designate capacity. I further a	d in this certificate, there gree to comply with the pr am familiar with and acce Corporation Servic By Leck		nt and agree to act in this and complete performance
	•		

(CONTINUED)

Page 1 of 2

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The name and address of each person at	uthorized to manage and control the Limited Liability Company 17/5
Title:	Name and Address:
"AMBR" = Authorized Member	·
"MGR" ≈ Managor AMBR	Coloman Cobia LLC
VIAIDIX	Coloman Cable, LLC 1530 Shields Drive
	Waukegan, IL 60085
	,
 ;	
·	
(
(Use attachment if necessary)	
TCLE V: Effective date, if other than the date u effective date is listed, the date must be speare of filing.)	of filing: Upon filing (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days af
TCLE V: Effective date, if other than the date u effective date is listed, the date must be spo	ecific and cannot be more than five business days prior to or 90 days af
ICLE V: Effective date, if other than the date to effective date is listed, the date must be speared of filing.) ICLE VI: Other provisions, if any.	ecific and cannot be more than five business days prior to or 90 days af
TCLE V: Effective date, if other than the date to effective date is listed, the date must be speare of filing.) TCLE VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 days af
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TCLE V: Effective date, if other than the date a effective date is listed, the date must be speciate of filing.) TCLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mean (In accordance with section to	mber or an authorized representative of a member.
TCLE V: Effective date, if other than the date to effective date is listed, the date must be speciate of filing.) TCLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a metaline and the section is constituted an affirmation or	mber or an authorized representative of a member. 505.0203 (1) (b), Florida Statutes, the execution of this document needs the penalties of perjury that the facts stated herein are true.
TCLE V: Effective date, if other than the date to effective date is listed, the date must be speciate of filing.) TCLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a met (In accordance with section of constitutes an affirmation of I am aware that any false interests.)	mber or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
TCLE V: Effective date, if other than the date to effective date is listed, the date must be speciate of filing.) TCLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a met (In accordance with section of constitutes an affirmation of I am aware that any false interests.)	mber or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document need the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State leny as provided for in s.817.155, F.S.)

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Filing Fees:

\$125.00 Filing Fee for Acticles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
\ \\
PICK-UP WAIT MAIL
1
(Business Entity Name)
F39162 (Document Number)
(Document runnes),
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:
:
MAR 2 5 2016
A. LURIT



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2014 MAR 24 AM 9: 67

Office Use Only

PATENT REEL: 041725 FRAME: 0937

RECORDED: 02/15/2017