

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT4411998

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CERTIFICATE OF CONVERSION
CONVEYING PARTY DATA	
Name	Execution Date
KEITHLEY INSTRUMENTS, INC.	06/02/2016
RECEIVING PARTY DATA	
Name:	KEITHLEY INSTRUMENTS, LLC
Street Address:	28775 AURORA ROAD
City:	OLON
State/Country:	OHIO
Postal Code:	44139
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	15395812
CORRESPONDENCE DATA	
Fax Number:	(503)274-4622
<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:	503-222-3613
Email:	LisaBennett@techlaw.com
Correspondent Name:	MARGER JOHNSON
Address Line 1:	888 SW 5TH AVENUE
Address Line 2:	SUITE 1050
Address Line 4:	PORTLAND, OREGON 97204
ATTORNEY DOCKET NUMBER:	11652-US1-9025-1629
NAME OF SUBMITTER:	KEVIN S. ROSS
SIGNATURE:	/Kevin S. Ross/
DATE SIGNED:	05/12/2017
Total Attachments: 5	
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Form 700 Prescribed by:
JON HUSTED
OHIO SECRETARY OF STATE

Toll Free (877) SOS FILE (877-787-3453)
Central Ohio: (614) 406-3910
www.OhioSecretaryofState.gov
buseary@OhioSecretaryofState.gov
File online or for more information: www.OHBusinessCentral.com

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 1319
Columbus, OH 43216
Expedite Filing (Two business day processing time. Requires an additional \$100.00)
P.O. Box 1390
Columbus, OH 43216

Certificate for Conversion for Entities Converting
Within or Off the Records of the Ohio Secretary of State

Filing Fee: \$99
Form Must Be Typed

(CHECK ONLY ONE (1) BOX)

(1) [X] Converting Within The Records of the Ohio Secretary of State
(2) [] Converting Off The Records of the Ohio Secretary of State (187-VXX)

Name of the converting entity: Keithley Instruments, Inc.
Jurisdiction of Formation: Ohio
Charter/Registration Number: 249998
The converting entity is a:
[X] Domestic Corporation (For-Profit or Nonprofit)
[] Foreign Corporation (For-Profit or Nonprofit)
[] Domestic Nonprofit Limited Liability Company
[] Foreign Nonprofit Limited Liability Company
[] Domestic For-Profit Limited Liability Company
[] Foreign For-Profit Limited Liability Company
[] Partnership
[] Domestic Limited Partnership
[] Foreign Limited Partnership
[] Domestic Limited Liability Partnership
[] Foreign Limited Liability Partnership
The converting entity hereby states that it has complied with all laws in the jurisdiction under which it exists and that those laws permit the conversion.

RECEIVED
JUN 3 11 09 AM
CLIENT SERVICE CENTER

Name of the converted entity

Jurisdiction of Formation

The converted entity is a:
(Check Only (1) One Box)

Domestic Corporation (For-Profit) Partnership

Foreign Corporation (For-Profit or Nonprofit) Domestic Limited Partnership

Domestic Nonprofit Limited Liability Company Foreign Limited Partnership

Foreign Nonprofit Limited Liability Company Domestic Limited Liability Partnership

Domestic For-Profit Limited Liability Company Foreign Limited Liability Partnership

Foreign For-Profit Limited Liability Company

Effective Date (Optional) (The conversion is effective upon the filing of this certificate or on a later date specified in the certificate)

Name and address of the person or entity that will provide a copy of the declaration of conversion upon written request.

Name

Mailing Address

City State Zip Code

Required information that must accompany conversion certificate if box 2 is checked

If the converting entity is a domestic or foreign entity that will not be licensed in Ohio, provide the name and address of the statutory agent upon whom any process, notice or demand may be served.

Name of Statutory Agent

Mailing Address

City State Zip Code

See instructions for additional filing requirements if

(1) the conversion creates a new domestic entity,
 (2) the converted entity is a foreign entity that desires to transact business in Ohio; or
 (3) if a domestic corporation or foreign corporation licensed in Ohio is the converting entity.

IN WITNESS WHEREOF, the conversion is authorized on behalf of the converting entity and that each person signing the certificate of conversion is authorized to do so.

Required
Must be signed by an
authorized representative.


Signature

Vice President & Secretary
By (if applicable)

James F. O'Reilly
Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

Complete the information in this section.

AFFIDAVIT

In lieu of dissolution releases from various governmental authorities.

Keithley Instruments, Inc.

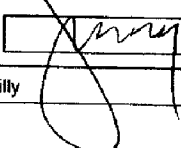
Name of Corporation

The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1701.95 of the ORC.

Agency	Date Notified	Agency	Date Notified
Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, Ohio 43215	06/02/2016	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319 Overnight: P.O. Box 182413 Columbus, OH 43218-2413	06/02/2016 Regular: P.O. Box 182413 Columbus, OH 43218-2413
*Only required for domestic for-profit corporations		<input type="checkbox"/> The corporation is not required to pay or the department of taxation has not assessed any personal property tax.	
Ohio Department of Taxation Taxpayer Services Division/Tax Release Unit PO Box 182382 Columbus, OH 43218-2382 Dissolution@tax.state.oh.us		*Complete this date notified field only if the corporation is a domestic non-profit corporation or foreign corporation. [see* note below]	

*Note: Domestic for-profit corporations must submit with this filing a Certificate of Tax Clearance issued by the Ohio Department of Taxation.

Note: This affidavit must be signed by one or more persons executing the certificate or by an officer of the corporation.


Signature  Title Vice President & Secretary

James F. O'Reilly
Name

2200 Pennsylvania Ave NW, Suite 800W
Mailing Address

Washington D.C. 20037
City State Zip Code

Sworn to and subscribed in my presence on 6/2/2016
Date

Seal  Notary Public

Commission Expires 7/31/2017
Date

AFFIDAVIT OF PERSONAL PROPERTY

State of Ohio

County of Cuyahoga

James F. O'Reilly
Name of Officer

Vice President & Secretary
Title of Officer

of

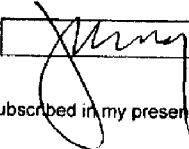
Keithley Instruments, Inc.
Name of Corporation

and that this affidavit is made in compliance with Section 1701.86(H)(1) of the Ohio Revised Code.

That above-named corporation: (Check one (1) of the following)

- Has no personal property in any county in Ohio
- Is the type required to pay personal property taxes to state authorities only
- Has personal property in the following county (ies)

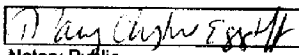
Cuyahoga

Signature: 

Title: Vice President & Secretary

Sworn to and subscribed in my presence on Date 6/2/2016

Seal


Notary Public

Expiration date of Notary Public's Commission

Date 07/31/2017

