

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT4944857

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	07/01/2014

CONVEYING PARTY DATA

Name	Execution Date
PHILADELPHIA HEALTH & EDUCATION CORPORATION D/B/A DREXEL UNIVERSITY COLLEGE OF MEDICINE	06/04/2014

RECEIVING PARTY DATA

Name:	DREXEL UNIVERSITY
Street Address:	3141 CHESTNUT STREET
City:	PHILADELPHIA
State/Country:	PENNSYLVANIA
Postal Code:	19104

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	15833539

CORRESPONDENCE DATA**Fax Number:** (215)540-5818*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:** 2155409200**Email:** docketing@howsoniplaw.com**Correspondent Name:** HOWSON & HOWSON LLP**Address Line 1:** 350 SENTRY PARKWAY**Address Line 2:** BUILDING 620, SUITE 210**Address Line 4:** BLUE BELL, PENNSYLVANIA 19422

ATTORNEY DOCKET NUMBER:	DRX-08-0899C1-USA
NAME OF SUBMITTER:	HAO WU
SIGNATURE:	/HaoWu/
DATE SIGNED:	05/03/2018

Total Attachments: 3source=PHEC_Drexel_Merger_effective_07012014#page1.tif
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PENNSYLVANIA DEPARTMENT OF STATE
 BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Articles/Certificate of Merger
 (15 Pa.C.S.)

- Domestic Business Corporation (§ 1926)
 Domestic Nonprofit Corporation (§ 5926)
 Limited Partnership (§ 8547)

Name		
Christina M. Carry, Legal Assitant Saul Ewing LLP		
Address		
1200 Liberty Ridge Drive, Suite 200		
City	State	Zip Code
Wayne, PA		19087

Document will be returned to the name and address you enter to the left.

Fee: \$150 plus \$40 additional for each Party in additional to two

In compliance with the requirements of the applicable provisions (relating to articles of merger or consolidation), the undersigned, desiring to effect a merger, hereby state that:

1. The name of the corporation/limited partnership surviving the merger is:				
Drexel University				
2. Check and complete one of the following:				
<input checked="" type="checkbox"/> The surviving corporation/limited partnership is a domestic business/nonprofit corporation/limited partnership and the (a) address of its current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):				
(a) Number and Street	City	State	Zip	County
3141 Chestnut Street	Philadelphia	PA	19104	Philadelphia
(b) Name of Commercial Registered Office Provider				County
c/o				
The surviving corporation/limited partnership is a qualified foreign business/nonprofit corporation/limited partnership incorporated/formed under the laws of _____ and the (a) address of its current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):				
(a) Number and Street	City	State	Zip	County
(b) Name of Commercial Registered Office Provider				County
c/o				
The surviving corporation/limited partnership is a nonqualified foreign business/nonprofit corporation/limited partnership incorporated/formed under the laws of _____ and the address of its principal office under the laws of such domiciliary jurisdiction is:				
Number and Street	City	State	Zip	

2014 JUN 11 PM 2:47
 PA DEPT OF STATE

DSCB: 15-1926/5926/8547-3

IN TESTIMONY WHEREOF, the undersigned corporation/~~limited partnership~~ has caused these Articles/Certificate of Merger to be signed by a duly authorized officer thereof this

4th day of June,
2014.

DREXEL UNIVERSITY

Name of Corporation/~~Limited Partnership~~

[Handwritten Signature]

Signature

President

Title

PHILADELPHIA HEALTH & EDUCATION CORPORATION

Name of Corporation/~~Limited Partnership~~

[Handwritten Signature]

Signature

Dean + Senior VP

Title

PATENT

RECORDED: 05/03/2018

REEL: 045707 FRAME: 0154