

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
 Stylesheet Version v1.2

EPAS ID: PAT5088614

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT	
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME	
<b>CONVEYING PARTY DATA</b>		
	<b>Name</b>	<b>Execution Date</b>
	PICOSPRAY LLC	03/13/2015
<b>RECEIVING PARTY DATA</b>		
<b>Name:</b>	PICOSPRAY, INC.	
<b>Street Address:</b>	3765 PLAZA DRIVE	
<b>City:</b>	ANN ARBOR	
<b>State/Country:</b>	MICHIGAN	
<b>Postal Code:</b>	48108	
<b>PROPERTY NUMBERS Total: 1</b>		
	<b>Property Type</b>	<b>Number</b>
	Application Number:	14062794
<b>CORRESPONDENCE DATA</b>		
<b>Fax Number:</b>	(313)234-2800	
<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>Phone:</b>	313-234-7100	
<b>Email:</b>	shall@foley.com	
<b>Correspondent Name:</b>	FOLEY & LARDNER LLP	
<b>Address Line 1:</b>	500 WOODWARD AVENUE	
<b>Address Line 2:</b>	SUITE 2700	
<b>Address Line 4:</b>	DETROIT, MICHIGAN 48226	
<b>ATTORNEY DOCKET NUMBER:</b>	103326-0103	
<b>NAME OF SUBMITTER:</b>	BRADLEY M. KRUL	
<b>SIGNATURE:</b>	/BRADLEY M. KRUL/	
<b>DATE SIGNED:</b>	08/08/2018	
<b>Total Attachments: 8</b>		
source=Certificate_of_Conversion_Picospray#page1.tif		
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**PATENT**

**REEL: 046748 FRAME: 0902**

***MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS***  
***FILING ENDORSEMENT***

***This is to Certify that the CERTIFICATE OF CONVERSION***

***for***

***PICOSPRAY LLC***

***ID NUMBER: D75490***

***received by facsimile transmission on March 13, 2015 is hereby endorsed.***

***Filed on March 13, 2015 by the Administrator.***

***This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.***



***In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 13th day of March, 2015.***

A handwritten signature in cursive script, appearing to read "A. Schefke".

***Alan J. Schefke, Director  
Corporations, Securities & Commercial Licensing Bureau***

***Sent by Facsimile Transmission***

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU		
(FOR BUREAU USE ONLY)		
Date Received		
	This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.	
Name VARNUM LLP		
Address 39500 HIGH POINTE BLVD., SUITE 350		
City NOVI	State MICHIGAN	ZIP Code 48375
		EFFECTIVE DATE:

Document will be returned to the name and address you enter above.  
If left blank, document will be returned to the registered office.

**CERTIFICATE OF CONVERSION****For use by a Limited Liability Company Converting into a Business Organization**

Pursuant to the provisions of Act 284, Public Acts of 1972 (profit corporations) and Act 23, Public Acts of 1993 (limited liability companies), the undersigned corporation executes the following Certificate of Conversion.

**1. Before Conversion**

Entity Name: PICOSPRAY LLC		Entity ID: D75490
Indicate (X) Entity Type	<input checked="" type="checkbox"/>	Domestic Limited Liability Company
	Street Address, if different than the one provided in Item 3:	
	<input type="checkbox"/>	Foreign Limited Liability Company

**2. After Conversion**

Entity Name: PICOSPRAY INC.	
Indicate (X) Entity Type	<input type="checkbox"/> Domestic Profit Corporation
	<input checked="" type="checkbox"/> Foreign Corporation
	<input type="checkbox"/> Domestic Limited Liability Company
	<input type="checkbox"/> Foreign Limited Liability Company
If the converting limited liability company is a domestic limited liability company that has not commenced business, has not issued any membership interests; has no debts or other liabilities, and has not received or returned any payments for its membership interests, proceed to Item 4.	
If the converting limited liability company is a domestic limited liability company that has commenced business or a foreign limited liability company, proceed to Item 3.	

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**3. Surviving Business Organization**

Governing Statute:

SECTION 265 OF THE DELAWARE GENERAL CORPORATION LAW

Street Address:

224-2 W. SUMMIT ST., ANN ARBOR, MICHIGAN 48103

Principal Place of Business:

224-2 W. SUMMIT ST., ANN ARBOR, MICHIGAN 48103

4. (Complete only if a later effective date is desired other than the date of filing. The date must be no more than 90 days after the receipt of this document in the office.)

The conversion is effective on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

The plan of conversion will be furnished by the surviving business organization, on request and without cost, to any member of the converting limited liability company.

The conversion is permitted by the law that will govern the internal affairs of the business organization after conversion and the surviving business organization complies with that law in converting.

5. The assumed names being transferred to continue for the remaining effective period of the Certificate of Assumed Name on file prior to the conversion are:

Assumed Name	Expiration Date

6. The converting limited liability company's name and/or assumed name(s) to be used as new assumed name(s) of the surviving business organization:

Assumed Name

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**7. Signatures:** Complete only Section (a) or (b) if the converting entity is a domestic limited liability company.  
Proceed to Item 8 if the converting entity is a foreign limited liability company.

*Complete if the domestic limited liability company has not commenced business:*

- a) The domestic limited liability company has not yet commenced business, has not issued any membership interests; has no debts or other liabilities, and has not received or returned any payments for its membership interests and the plan of conversion was adopted and approved by unanimous consent of the organizers, in accordance with Section 708(1)(d) of the Act.

Signed this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
(Signature of Organizer)

\_\_\_\_\_  
(Type or Print Name)

\_\_\_\_\_  
(Signature of Organizer)

\_\_\_\_\_  
(Type or Print Name)

\_\_\_\_\_  
(Signature of Organizer)

\_\_\_\_\_  
(Type or Print Name)

\_\_\_\_\_  
(Signature of Organizer)

\_\_\_\_\_  
(Type or Print Name)

*Complete if the domestic limited liability company has commenced business:*

- b) The plan of conversion was adopted and approved by the unanimous vote of the members, entitled to vote, unless the articles of organization or operating agreement provide otherwise, in accordance with Section 708(1)(c) of the Act.

Signed this 13 day of March 2015

By \_\_\_\_\_  
(Signature of Member, Manager or Authorized Agent)

LIHANG NONG, MANAGER  
\_\_\_\_\_  
(Type or Print Name)

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03/13/2015 2:08PM (GMT-04:00)

***MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS***  
***FILING ENDORSEMENT***

***This is to Certify that the APPLICATION FOR CERTIFICATE OF AUTHORITY***

***for***  
***PICOSPRAY INC.***

***ID NUMBER: 60845F***

***received by facsimile transmission on March 16, 2015 is hereby endorsed.***

***Filed on March 16, 2015 by the Administrator.***

***This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.***



***In testimony whereof, I have hereunto set my  
hand and affixed the Seal of the Department,  
in the City of Lansing, this 16th day  
of March, 2015.***

***Alan J. Schefke, Director  
Corporations, Securities & Commercial Licensing Bureau***

***Sent by Facsimile Transmission***

# **MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU**

Date Received

(FOR BUREAU USE ONLY)

This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.

Name

Varnum LLP, Attention: Rick Manczak

Address

39500 High Pointe Blvd., Suite 350

City

Novi

State

MI

ZIP Code

48375

EFFECTIVE DATE:

Document will be returned to the name and address you enter above.  
If left blank, document will be returned to the registered office.

## **APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN MICHIGAN** For use by Foreign Corporations (Please read information and instructions on the last page)

Pursuant to the provisions of Act 284, Public Acts of 1972 (profit corporations), or Act 162, Public Acts of 1982 (nonprofit corporations), the undersigned execute the following Application:

1. The name of the corporation is:

Picospray Inc.

2. (Complete this item only if the corporate name in item 1 is not available for use in Michigan.)

The assumed name of the corporation to be used in all its dealings with the Bureau and in the transaction of its business or conducting of its affairs in Michigan is:

3. It is incorporated under the laws of Delaware. The date of its incorporation is March 13, 2015, and the term of existence if other than perpetual is \_\_\_\_\_.

4. a. The address of the main business or headquarters office of the corporation is:

224-2 W. Summit St., Ann Arbor, MI 48103

(Street Address)

(City)

(State)

(ZIP Code)

b. The mailing address if different than above:

(Street Address)

(City)

(State)

(ZIP Code)

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5. The street address of its registered office in Michigan is:

224-2 W. Summit St., Ann Arbor, MI 48103, Michigan \_\_\_\_\_  
(Street Address) (City) (ZIP Code)

The mailing address of the registered office in Michigan if different than above:

\_\_\_\_\_, Michigan \_\_\_\_\_  
(Street Address or P.O. Box) (City) (ZIP Code)

The name of the resident agent at the registered office is: Lihang Nong

The resident agent is an agent of the corporation upon whom process against the corporation may be served.

6. The specific business or affairs which the corporation is to transact or conduct in Michigan is as follows:

Design and development of fuel injection system


The corporation is authorized to transact such business in the jurisdiction of its incorporation.

7. (To be completed by profit corporations only)

The total authorized shares of the corporation are: 5,800,000

8. If the applicant is a trust please specify any powers or privileges possessed by the trust that are not possessed by an individual or a partnership.

Signed this 16 day of March, 2015

By   
(Signature of Authorized Officer or Agent)

Lihang Nong, President

(Type of Print Name)

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# Delaware

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*The First State*

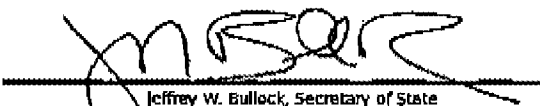
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PICOSPRAY INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF MARCH, A.D. 2015.

5709773 8300

150354859

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2198756

DATE: 03-13-15

PATENT

RECORDED: 08/08/2018

REEL: 046748 FRAME: 0910

03/16/2015 12:22PM (GMT-04:00)