506154764 07/15/2020

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT6201496

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

CONVEYING PARTY DATA

| Name | Execution Date |
|------------------|-----------------------|
| GBS VENTURES LLC | 03/21/2017 |

RECEIVING PARTY DATA

| Name: | NOCIRA, LLC |
|-----------------|-------------------|
| Street Address: | 1305 W AUTO DRIVE |
| City: | TEMPE |
| State/Country: | ARIZONA |
| Postal Code: | 85284 |

PROPERTY NUMBERS Total: 2

| Property Type | Number |
|---------------------|----------|
| Application Number: | 16377928 |
| Application Number: | 14292469 |

CORRESPONDENCE DATA

Fax Number: (949)760-9502

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: 949-760-0404
Email: efiling@knobbe.com

Correspondent Name: KNOBBE, MARTENS, OLSON & BEAR LLP.

Address Line 1: 2040 MAIN STREET, 14TH FL. Address Line 4: IRVINE, CALIFORNIA 92614

| ATTORNEY DOCKET NUMBER: | NCIRA.009A1 / NCIRA.009C1 |
|-------------------------|---------------------------|
| NAME OF SUBMITTER: | ALBERT J. SUEIRAS |
| SIGNATURE: | /Albert J. Sueiras/ |
| DATE SIGNED: | 07/15/2020 |

Total Attachments: 7

source=2020-07-15 GBS to NOCIRA Conversion - NOCIRA.000GEN#page1.tif source=2020-07-15 GBS to NOCIRA Conversion - NOCIRA.000GEN#page2.tif source=2020-07-15 GBS to NOCIRA Conversion - NOCIRA.000GEN#page3.tif source=2020-07-15 GBS to NOCIRA Conversion - NOCIRA.000GEN#page4.tif source=2020-07-15 GBS to NOCIRA Conversion - NOCIRA.000GEN#page5.tif

PATENT 506154764 REEL: 053219 FRAME: 0584

source=2020-07-15 GBS to NOCIRA Conversion - NOCIRA.000GEN#page6.tif source=2020-07-15 GBS to NOCIRA Conversion - NOCIRA.000GEN#page7.tif

PATENT REEL: 053219 FRAME: 0585



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF CONVERSION OF A COLORADO LIMITED

LIABILITY COMPANY UNDER THE NAME OF "GBS VENTURES LLC" TO A

DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "GBS

VENTURES LLC" TO "NOCIRA, LLC", FILED IN THIS OFFICE ON THE TWENTY
FIRST DAY OF MARCH, A.D. 2017, AT 1:27 O'CLOCK P.M.

TANYS OF THE STATE OF THE STATE

6355344 8100F SR# 20171894675

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State

Authentication: 202236365

Date: 03-21-17

PATENT REEL: 053259 FRAME: 0980

State of Delaware
Secretary of State
Division of Corporations
Delivered 01:27 PM 03/21/2017
FILED 01:27 PM 03/21/2017
SR 20171894675 - File Number 6355344

STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A LIMITED LIABILITY COMPANY TO A LIMITED LIABILITY COMPANY PURSUANT TO SECTION 214 OF THE DELAWARE LIMITED LIABILITY COMPANY ACT

- 1. The jurisdiction where the limited liability company first formed is Colorado and the date the limited liability company first formed is August 8, 2013.
- 2. The name of the limited liability company immediately prior to filing this Certificate of Conversion is GBS Ventures LLC.
- 3. The name of the limited liability company as set forth in the Certificate of Formation is Nocira, LLC.
- 4. The effective date of the conversion of the limited liability company shall be upon the filing of this Certificate of Conversion and the aforementioned Certificate of Formation.

IN WITNESS WHEREOF, the undersigned being duly authorized to sign on behalf of the converting limited liability company has executed this Certificate of Conversion on the 21st day of March 2017.

By:

Timothy A. Crown

WEST\274269420.1

PATENT

REEL: 053259 FRAME: 0990

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND

CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "NOCIRA, LLC"

FILED IN THIS OFFICE ON THE TWENTY-FIRST DAY OF MARCH, A.D.

2017, AT 1:27 O'CLOCK P.M.

TARYS OF THE PARTY OF THE PARTY

6355344 8100F SR# 20171894675

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State

Authentication: 202236365

Date: 03-21-17

PATENT REEL: 053259 FRAME: 0598

State of Delaware
Secretary of State
Division of Corporations
Delivered 01:27 PM 03/21/2017
FILED 01:27 PM 03/21/2017
SR 20171894675 - File Number 6355344

CERTIFICATE OF FORMATION

OF

NOCIRA, LLC

This Certificate of Formation of Nocira, LLC (the "LLC") is being duly executed and filed by Timothy A. Crown, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 <u>Del.C.</u> §18-101, et seq.).

FIRST. The name of the limited liability company formed hereby is Nocira, LLC.

SECOND. The address of the registered office of the LLC in the State of Delaware is c/o The Corporation Trust Company, Corporation Trust Center, 1209 Orange Street, County of New Castle, Wilmington, Delaware 19801.

THIRD. The name and address of the registered agent for service of process on the LLC in the State of Delaware is The Corporation Trust Company, Corporation Trust Center, 1209 Orange Street, County of New Castle, Wilmington, Delaware 19801.

IN WITNESS WHEREOF, the undersigned has caused this Certificate of Formation to be duly executed as of March 21 _____, 2017.

Authorized Person

WEST\274367270.1

PATENT

REEL: 053259 FRAME: 0992



Document must be filed electronically.
Paper documents are not accepted.
Fees & forms are subject to change.
For more information or to print copies of filed documents, visit www.sos.state.co.us.

Form of entity

Principal office street address

Colorado Secretary of State

Date and Time: 03/21/2017 02:08 PM

ID Number: 20131461075

Document number: 20171215394

Amount Paid: \$50.00

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Conversion Converting a Domestic Entity into a Foreign Entity filed pursuant to § 7-90-201.7 (1) and § 7-90-204.5 of the Colorado Revised Statutes (C.R.S.)

For the converting entity, its ID number, entity name, form of entity, jurisdiction under the law of which it is formed, and principal office address are
 ID number 20131461075
 (Colorado Secretary of State ID number)
 Entity name GBS Ventures LLC

Jurisdiction Colorado

Limited Liability Company

4747 East Elliot
(Street number and name)
Suite #32

Phoenix AZ 85044

(City) (State) (ZIP/Postal Code)
United States
(Province – if applicable) (Country)

Principal office mailing address
(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)
(State)
(ZIP/Postal Code)

(Province - if applicable) (Country)

2. For the resulting entity, its true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

Nocira, LLC True name Foreign Limited Liability Company Form of entity Delaware Jurisdiction 1305 W, Auto Drive Street address (Street number and name) 85284 Tempe ΑZ (ZIP/Postal Code) (City) (State) (Country) (Province - if applicable)

CONV_FOR_I

Page 1 of 3

Rev. 12/01/2012

| | (leave blank if same as street address) | (Street number and name or Post Office Box information) | | | |
|---------------------------|--|--|---|---|------------|
| | (City) | (State) | (ZIP/Postal Code) | <u> </u> | |
| | | (Province – if applicable) | (Country) | | |
| . The | e converting entity has been conver | ted into the resulting entity pur | rsuant to section | 7-90-201.7, C.R.S. | |
| ŀ. (Ma | The resulting foreign entity does may be addressed to the entity an C.R.S. | not maintain a registered agen | it in this state an | | |
| V | or The resulting foreign entity main 204.5, C.R.S. The person appoin registered agent's name and addr | ited as registered agent has con | | | |
| | Name (if an individual) | | | | |
| | Or | (Last) | (First) | (Middle) (S | uffix) |
| | (if an entity) (Caution: Do not provide both an indivi | CR Miles P.C. | | | |
| | Street address | 405 Mason Court | | | |
| | | Sulte 119 (Street number and) | name) | | |
| | | Fort Collins | 8 | 0524 | |
| | | (City) | (State) | (ZIP Code) | |
| | Mailing address (leave blank, if same as street address) | (Street number and nam | e or Post Office Box | information) | |
| | | | СО | | |
| | | (City) | (State) | (ZIP Code) | |
| | upplicable, adopt the following statement by mo This document contains additional ution: Leave blank if the document does no the consequences. Read instructions before | information as provided by la not have a delayed effective date. S | w. | Tective date has signifi | 'cant |
| | he following statement applies, adopt the stater | | | uired format.) | |
| The | e delayed effective date and, if appl | icable, time of this document a | are | vyyy hour:minute am/pm) | <u> </u> |
| ickno such i of the | e: ng this document to be delivered to wledgment of each individual causi ndividual's act and deed, or that suc person on whose behalf such indivi mity with the requirements of part | ng such delivery, under penalt h individual in good faith beli idual is causing such documen | ies of perjury, the eves such docun t to be delivered | nat such document in nent is the act and d for filing, taken in | is leed |

Page 2 of 3

CONV_FOR_I

PATENT REEL: 053259 FRAME: 0994

Rev. 12/01/2012

documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

7. The true name and mailing address of the individual causing this document to be delivered for filing are

| Crown | Timothy | A. | |
|----------------------------|---------|------------------------|----------|
| (Last) | (First) | (Middle) | (Suffix) |
| 4747 E. Elliot, Suite | | | |
| (Sir eet tiumber | | ffice Box information) | |
| Phoenix | AZ | 85044 | |
| (City) | (State) | (ZIP/Postal Code) | |
| | | • | |
| (Province – if applicable) | (Coun | (m) | |

(If applicable, adopt the following statement by marking the box and include an attachment.)

This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).

CONV_FOR_1 Page 3 of 3 Rev. 12/01/2012

PATENT REEL: 0**5**32**59** FRAME: 0**9**9**2**