

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT6329354

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	CHANGE OF NAME	
CONVEYING PARTY DATA		
	Name	Execution Date
	ZODIAC POOL SYSTEMS, INC.	09/13/2017
RECEIVING PARTY DATA		
Name:	ZODIAC POOL SYSTEMS LLC	
Street Address:	2882 WHIPTAIL LOOP #100	
City:	CARLSBAD	
State/Country:	CALIFORNIA	
Postal Code:	92010	
PROPERTY NUMBERS Total: 1		
	Property Type	Number
	Application Number:	16732474
CORRESPONDENCE DATA		
Fax Number:	(404)541-3195	
<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:	(404)815-6500	
Email:	sharvey@kilpatricktownsend.com	
Correspondent Name:	KILPATRICK TOWNSEND & STOCKTON LLP	
Address Line 1:	1100 PEACHTREE STREET NE, SUITE 2800	
Address Line 2:	MAILSTOP: IP DOCKETING - 22	
Address Line 4:	ATLANTA, GEORGIA 30309	
ATTORNEY DOCKET NUMBER:	061222-1171934	
NAME OF SUBMITTER:	SANDEE HARVEY	
SIGNATURE:	/Sandee Harvey/	
DATE SIGNED:	09/30/2020	
Total Attachments: 4		
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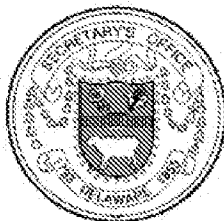
Delaware

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 CONVERSION OF A DELAWARE CORPORATION UNDER THE NAME OF "ZODIAC POOL SYSTEMS, INC." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "ZODIAC POOL SYSTEMS, INC." TO "ZODIAC POOL SYSTEMS LLC", FILED IN THIS OFFICE ON THE TWENTY-NINTH DAY OF SEPTEMBER, A.D. 2017, AT 1:36 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF CONVERSION IS THE THIRTIETH DAY OF SEPTEMBER, A.D. 2017 AT 8:01 O'CLOCK A.M.



A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

3107192 8100V
SR# 20176405087

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

Authentication: 203318441
Date: 09-29-17

PATENT
REEL: 053954 FRAME: 0322

STATE OF DELAWARE
CERTIFICATE OF CONVERSION
FROM A CORPORATION TO A
LIMITED LIABILITY COMPANY PURSUANT TO
SECTION 18-214 OF THE LIMITED LIABILITY ACT

- 1.) The jurisdiction where the Corporation first formed is Delaware.
- 2.) The jurisdiction immediately prior to filing this Certificate is Delaware.
- 3.) The date the corporation first formed is October 5, 1999.
- 4.) The name of the Corporation immediately prior to filing this Certificate is
Zodiac Pool Systems, Inc.
- 5.) The name of the Limited Liability Company as set forth in the Certificate of
Formation is Zodiac Pool Systems LLC.
- 6.) This Certificate of Conversion is to become effective on September 30, 2017 at 8:01 am

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the
29th day of September, A.D. 2017

By: David McKenery, Jr.
Authorized Person

Name: David McKenery, Jr.
Print or Type

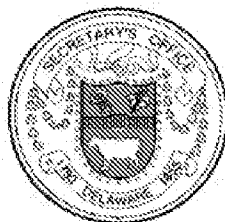
Delaware

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 "ZODIAC POOL SYSTEMS LLC" FILED IN THIS OFFICE ON THE TWENTY-NINTH DAY OF SEPTEMBER, A.D. 2017, AT 1:36 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF FORMATION IS THE THIRTIETH DAY OF SEPTEMBER, A.D. 2017 AT 8:01 O'CLOCK A.M.



3107192 8100V
SR# 20176405087

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Authentication: 203318441
Date: 09-29-17

PATENT
REEL: 053954 FRAME: 0324

STATE of DELAWARE
LIMITED LIABILITY COMPANY
CERTIFICATE of FORMATION

• First: The name of the limited liability company is _____
Zodiac Pool Systems LLC

• Second: The address of its registered office in the State of Delaware is
251 Little Falls Drive in the City of Wilmington
Zip Code 19808

The name of its Registered agent at such address is _____
Corporation Service Company

• Third: (Insert any other matters the members determine to include herein.)

This Certificate of Formation is to become effective on
September 30, 2017 at 8:01 am

In Witness Whereof, the undersigned have executed this Certificate of Formation this
29th day of September, 2017.

By:  _____
Authorized Person(s)

Name: David McKenery, Jr.
Typed or Printed