

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT6580674

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	CHANGE OF NAME
CONVEYING PARTY DATA	
Name	Execution Date
ABAXIS, INC.	02/26/2020
RECEIVING PARTY DATA	
Name:	ABAXIS LLC
Street Address:	3240 WHIPPLE ROAD
City:	UNION CITY
State/Country:	CALIFORNIA
Postal Code:	94587
PROPERTY NUMBERS Total: 1	
Property Type	Number
Application Number:	16806463
CORRESPONDENCE DATA	
Fax Number:	(202)842-7899
<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:	2028427800
Email:	zIPPatentDocketingMailboxUS@cooley.com
Correspondent Name:	COOLEY LLP / PATENT DEPARTMENT
Address Line 1:	1299 PENNSYLVANIA AVENUE, NW, SUITE 700
Address Line 4:	WASHINGTON, D.C. 20004
ATTORNEY DOCKET NUMBER:	ABAX-033/03US 010265-2433
NAME OF SUBMITTER:	MEGHANN K. TEAGUE
SIGNATURE:	/Meghann K. Teague/
DATE SIGNED:	03/03/2021
Total Attachments: 1	
source=Name_Change-AbaxisInc-to-AbaxisLLC#page1.tif	



State of California
Secretary of State

1631533-Out

Limited Liability Company
Articles of Organization - Conversion

LLC-1A

File #

FILED *Emk/SAR*
Secretary of State
State of California

FEB 26 2020

IPC

IMPORTANT — Read all instructions before completing this form.

This Space For Filing Use Only

Converted Entity Information

1. Name of Limited Liability Company (The name must include the words Limited Liability Company or the abbreviations LLC or L.L.C. The words Limited and Company may be abbreviated to Ltd. and Co., respectively.)

Abaxis LLC

2. The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

3. The limited liability company will be managed by (check only one):

☐

One Manager

☐

More Than One Manager

☒

All Limited Liability Company Member(s)

4. Initial Street Address of Limited Liability Company's Designated Office in CA

3240 Whipple Road, Union City

City

State

Zip Code

CA

94587

5. Initial Mailing Address of Limited Liability Company, if different from Item 4

City

State

Zip Code

6. Initial Agent for Service of Process: Item 6a: List the name of an individual or a corporation registered in CA under California Corporations Code section 1505 that agrees to be your agent for service of process. You may not list the converted entity as the agent. Item 6b: If the agent is an individual, list the agent's CA business or residential street address. Item 6c: If the agent is an individual and the converting entity is a CA corporation, limited partnership or general partnership, list the agent's mailing address. Do not list an address if the agent is a CA registered corporate agent as the address for service of process is already on file.

a. Name of Agent For Service of Process

C T Corporation System

b. If an individual, Street Address of Agent for Service of Process - Do not list a P.O. Box

City

State

Zip Code

CA

c. If an individual, Mailing Address of Agent for Service of Process

City

State

Zip Code

Converting Entity Information

7. Name of Converting Entity

/ Abaxis, Inc. /

8. Form of Entity

Corporation

9. Jurisdiction

California

10. CA Secretary of State File Number, if any

1631533

11. The principal terms of the plan of conversion were approved by a vote of the number of interests or shares of each class that equaled or exceeded the vote required. If a vote was required, the following was required for each class:

The class and number of outstanding interests entitled to vote.
Common stock - 1 outstanding share

AND

The percentage vote required of each class.
majority

Additional Information

12. Additional information set forth on the attached pages, if any, is incorporated herein by this reference and made part of this certificate.

13. I certify under penalty of perjury that the contents of this document are true. I declare I am the person who executed this instrument, which execution is my act and deed.

Salvatore J. Gagliardi

Signature of Authorized Person

Katherine H. Walden

Signature of Authorized Person

Salvatore J. Gagliardi, Vice President

Type or Print Name and Title of Authorized Person

Katherine H. Walden, Secretary

Type or Print Name and Title of Authorized Person