PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

EPAS ID: PAT7005914

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ARTICLES OF ORGANIZATION

CONVEYING PARTY DATA

Name	Execution Date
TRIAGENICS, LLC	09/08/2017

RECEIVING PARTY DATA

Name:	TRIAGENICS, INC.
Street Address:	3758 PINE CANYON DRIVE
City:	EUGENE
State/Country:	OREGON
Postal Code:	97405

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	17515360

CORRESPONDENCE DATA

Fax Number: (503)638-0367

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: 5038102560
Email: karen@kdopatent.com
Correspondent Name: KAREN DANA OSTER
Address Line 1: 17791 SW OVERLOOK LANE
Address Line 4: LAKE OSWEGO, OREGON 97034

ATTORNEY DOCKET NUMBER:	COL:TTBA18
NAME OF SUBMITTER:	KAREN DANA OSTER
SIGNATURE:	/Karen Dana Oster, Reg. No. 37,621/
DATE SIGNED:	11/03/2021

Total Attachments: 7
source=assn2_OR_articles#page1.tif
source=assn2_OR_articles#page2.tif
source=assn2_OR_articles#page3.tif
source=assn2_OR_articles#page4.tif
source=assn2_OR_articles#page5.tif
source=assn2_OR_articles#page6.tif

source=assn2_OR_articles#page7.tif

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certified Copy 127L725R8

I, DENNIS RICHARDSON, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

That the attached

Document File

for

TRIAGENICS, INC.

is a true copy of the original document(s).

In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

DENNIS RICHARDSON, SECRETARY OF STATE

8/9/2018

ARTICLES OF ORGANIZATION

Corporation Division
www.filinginoregon.com

E-FILED
Jan 15, 2013
OREGON SECRETARY OF STATE

REGISTRY NUMBER	90772691
TYPE	DOMESTIC LIMITED LIABILITY COMPANY
1. ENTITY NAME	TRIAGENICS, LLC
2. MAILING ADDRESS	PO BOX 10567 EUGENE OR 97440 USA
3. NAME & ADDRESS OF REGISTERED AGENT	DONALD R LAIRD 101 EAST BROADWAY SUITE 200 EUGENE OR 97401 USA
4. ORGANIZERS	DONALD R LAIRD PO BOX 10567 EUGENE OR 97440 USA
5. MEMBERS/MANAGERS	
MEMBER	LEIGH E COLBY 3758 PINE CANYON DRIVE EUGENE OR 97405 USA
MEMBER	JUDITH K COLBY 3758 PINE CANYON DRIVE EUGENE OR 97405 USA
6. DURATION	PERPETUAL
7. MANAGEMENT	This Limited Liability Company will be member-managed by one or more members
8. OPTIONAL PROVISIONS	The company elects to indemnify its members, managers, employees, agents for liability and related expenses under ORS 63.160.

E-FILED
Jan 15, 2013
OREGON SECRETARY OF STATE

By my signature, I declare as an authorized authority, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

9. ELECTRONIC SIGNATURE DONALD R LAIRD

Articles of Conversion - Business Entities

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - http://www.FilingInOregon.com - Phone: (503) 986-2200

FILED
SEP 14 2017
OREGON
SECRETARY OF STATE

Print Form | Reset Form

REGISTRY NUMBER: 907726-91

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

1. **Name of Business Entity Prior to Conversion:** TRIAGENICS, LLC
2. **Type of Business Entity Prior to Conversion:** INVESTMENT
3. **Name of Business Entity After Conversion:** TRIAGENICS, INC.
4. **Type of Business Entity After Conversion:** INVESTMENT
5. **Will the converted entity have continued existence in Oregon?** Yes ☒ No ☐
6. **If no, where will the jurisdiction be?**
7. **Select one of the following:**
   - ☐ A copy of the plan of conversion is attached.
   - ☒ Address where the plan of conversion is on file.

   Address 425 SE JACKSON STREET

   City ROSEBURG State OR Zip Code 97470

   A copy will be provided upon request to any owner, member or shareholder at no cost. Each party (as specified by the statute) to the conversion obtained authorization and approval in accordance with the statutes that govern the business entity.
8. **Provide additional information required for new entity type. (Required)**

   SEE ATTACHED CONVERSION INFORMATION SHEET.
9. **Execution:**

   (Must be signed by an officer or director for a corporation, a member or manager for a limited liability company, a general partner for a limited partnership, or a partner for a limited liability partnership.)

   By my signature, I declare as an authorized authority, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

Signature:	Printed Name:	Title:
	LEIGH E. COLBY,	President of Oregon Dental, INC., Sole Member

CONTACT NAME: (To resolve questions with this filing)

MARTIE MONGER

PHONE NUMBER: (Include area code)

(541) 984-0241

FEES

TRIAGENICS, INC.

90772691-18312598 CNV

Articles of Conversion (8/16)

Received Time Sep. 8. 2017 9:13AM No. 7176

907726-91

ATTACHMENT TO ARTICLES OF CONVERSION

PLAN OF CONVERSION

Entity Name Before Conversion: TriAgenics, LLC
Entity Name After Conversion: TriAgenics, Inc.

1. The initial member formed a limited liability company (the LLC), by way of an operating agreement, for the purpose of engaging in any lawful activity necessary or appropriate to conduct its business. The LLC continues in full effect as of the date of filing the Articles of Conversion.

2. At this time, the members wishes to convert the LLC to a corporation under the Oregon Business Corporations Act (Act) for the purpose of engaging in the same business and engaging in any lawful activity necessary or appropriate to accomplish such purpose. This conversion is being conducted pursuant to ORS §§ 63.467 through 63.497, governing conversion from a limited liability company, and ORS §§ 60.472 through 60.478, governing conversion to a corporation.

3. To convert the LLC to a corporation, the member will contribute its interest in the LLC to the corporation effective upon the date of filing the Articles of Conversion in exchange for shares in the corporation. After this conversion, the member will be the sole shareholder in the corporation, and its interests in the profits and losses and capital of the corporation will be the same as its prior interests in the profits and losses and capital of the LLC. The business of the LLC will continue to be carried on by the corporation.

4. Provide Additional Information Required for New Entity Type:

4.1. Registered Agent: Derek D. Simmons
4.2. Registered Agent Address: 425 SE Jackson Street, Roseburg, OR 97470
4.3. Mailing Address for Notices: 425 SE Jackson Street, Roseburg, OR 97470
4.4. Number of Shares: 500
4.5. Specialty Purpose: Investment
4.6. President: Leigh E. Colby, D.D.S., 3758 Pine Canyon Drive, Eugene, OR 97405
4.7. Secretary: Leigh E. Colby, D.D.S., 3758 Pine Canyon Drive, Eugene, OR 97405
4.8. Incorporator: Derek D. Simmons, 425 SE Jackson Street, Roseburg, OR 97470

Member:
Oregon Dental, Inc.

By_____
Leigh E. Colby, D.D.S., President

Articles of Conversion - Business Entities

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - http://www.FilingInOregon.com - Phone: (503) 986-2200

FILED
SEP 26 2017
OREGON
SECRETARY OF STATE

Print Form | Reset Form

REGISTRY NUMBER: 90772691

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

1. **Name of Business Entity Prior to Conversion:** TriAgenics, Inc.
2. **Type of Business Entity Prior to Conversion:** Oregon corporation
3. **Name of Business Entity After Conversion:** TriAgenics, Inc.
4. **Type of Business Entity After Conversion:** Delaware corporation
5. **Will the converted entity have continued existence in Oregon?** Yes ☒ ~~No~~ ☒
6. **If no, where will the jurisdiction be?** ~~Delaware~~
7. **Select one of the following:**
   - ☐ A copy of the plan of conversion is attached.
   - ☒ Address where the plan of conversion is on file.

   Address 3758 Pine Canyon Drive

   City Eugene State OR Zip Code 97405

A copy will be provided upon request to any owner, member or shareholder at no cost. Each party (as specified by the statute) to the conversion obtained authorization and approval in accordance with the statutes that govern the business entity.

8. **Provide additional information required for new entity type. (Required)**

   See attached Application for Authority to Transact Business.

9. **Execution:**

(Must be signed by an officer or director for a corporation, a member or manager for a limited liability company, a general partner for a limited partnership, or a partner for a limited liability partnership.)

By my signature, I declare as an authorized authority, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

Signature:	Printed Name:	Title:
[signature]	Leigh E. Colby	President

CONTACT NAME: (To resolve questions with this filing)

Sonia Ravin

PHONE NUMBER: (Include area code)

312-849-8145

FEES

Domestic Required Processing Fee	$100
Foreign Required Processing Fee	$275

TRIAGENICS, INC.

90772691-18336608 CNV

Articles of Conversion (6/16)

Application for Authority to Transact Business - Business/Professional

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - http://www.FilingInOregon.com - Phone: (503) 986-2200

Check the appropriate box below:

☒ FOREIGN BUSINESS CORPORATION
(Complete only 1, 2, 3, 4, 5, 6, 7, 8, 9, 11)

☐ FOREIGN PROFESSIONAL CORPORATION
(Complete all items)

REGISTRY NUMBER: 9077691
For office use only

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website. For office use only

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

1) **NAME OF CORPORATION:** TriAgenics, Inc.

NOTE: Must be identical to the name of record in home jurisdiction.

2) **REGISTRY NUMBER IN HOME JURISDICTION**

OR: **CERTIFICATE OF EXISTENCE** ☒ (ATTACHED)

(Please provide a web-verifiable registry number from the entity's home jurisdiction. Certain states, such as Delaware and New Jersey, do not provide status information online. Entities from such places must instead attach an official certificate of existence, current within 60 days of delivery to this office.)

3) **DATE OF INCORPORATION:** 09/22/2017

DURATION, IF NOT PERPETUAL:

4) **STATE OR COUNTRY OF ORGANIZATION:** Delaware

5) **ADDRESS OF PRINCIPAL OFFICE OF THE BUSINESS:**
(Address, city, state, zip)
3758 Pine Canyon Drive
Eugene, Oregon 97405

6) **NAME OF OREGON REGISTERED AGENT:** Derek D. Simmons

7) **REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS:** (Must be an Oregon Street Address which is identical to the registered agent's business office.)
425 SE Jackson Street
Roseburg, Oregon 97470

8) **ADDRESS FOR MAILING NOTICES:**
3758 Pine Canyon Drive
Eugene, Oregon 97405

9) **NAME AND ADDRESS OF PRESIDENT AND SECRETARY:**
President: Leigh E. Colby
Address: 3758 Pine Canyon Drive
Eugene, Oregon 97405
Secretary: Leigh E. Colby
Address: 3758 Pine Canyon Drive
Eugene, Oregon 97405

PROFESSIONAL CORPORATION ONLY

10) **PROFESSIONAL/BUSINESS SERVICES:** (List professional service(s) and other business services, if applicable, to be rendered.)

11) **EXECUTION:** (Must be signed by at least one officer or director.)
By my signature, I declare as an authorized authority, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

Signature: [signature] Printed Name: Leigh E. Colby Title: President

CONTACT NAME: (To resolve questions with this filing.)
Sonia Ravin

PHONE NUMBER: (Please include area code.)
312-849-8145

FEES
Required Processing Fee $375
Processing Fees are nonrefundable. Please make check payable to "Corporation Division."
Free copies are available at FilingInOregon.com, using the Business Name Search program.

50 - Application for Authority to Transact Business - Business Professional (03/12)