

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1
 Stylesheet Version v1.2

EPAS ID: PAT7035718

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	ENTITY CONVERSION
CONVEYING PARTY DATA	
Name	Execution Date
AEROETCH HOLDINGS, INC.	08/04/2021
RECEIVING PARTY DATA	
Name:	AEROETCH HOLDINGS, INC.
Street Address:	4-B CHRISTOPHER COLUMBUS AVENUE
City:	DANBURY
State/Country:	CONNECTICUT
Postal Code:	06510
PROPERTY NUMBERS Total: 1	
Property Type	Number
Patent Number:	10239185
CORRESPONDENCE DATA	
Fax Number:	(203)261-5676
<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:	2032611234
Email:	stc@warefressola.com
Correspondent Name:	WARE FRESSOLA MAGUIRE & BARBER LLP
Address Line 1:	755 MAIN STREET
Address Line 2:	BRADFORD GREEN, BUILDING FIVE
Address Line 4:	MONROE, CONNECTICUT 06468
ATTORNEY DOCKET NUMBER:	202-424.003
NAME OF SUBMITTER:	STEVEN T. COOPER
SIGNATURE:	/Steven T. Cooper/
DATE SIGNED:	11/21/2021
Total Attachments: 4	
source=0010096611 - Certificate of Domestication#page1.tif	
source=0010096611 - Certificate of Domestication#page2.tif	
source=0010096611 - Certificate of Domestication#page3.tif	
source=0010096611 - Certificate of Domestication#page4.tif	

STATE OF CONNECTICUT

CERTIFICATE OF DOMESTICATION

Pursuant to the provisions of Part V of Chapter 616 of the Connecticut General Statutes, the undersigned hereby submits this Statement of Domestication in order for AEROETCH HOLDINGS, INC., a Delaware corporation (the "Corporation"), to be converted into and become a Connecticut corporation pursuant to a Plan of Domestication dated as of August 4th, 2021 (the "Domestication"), and for that purpose does hereby certify:

1. The name, jurisdiction of organization and type of the domesticating entity is AEROETCH HOLDINGS, INC., a Delaware corporation.

2. The name and jurisdiction of organization of the domesticated entity is AEROETCH HOLDINGS, INC., a Connecticut corporation.

3. The Plan of Domestication was approved by the Corporation in accordance with Part V of Chapter 616 of the Connecticut General Statutes.

4. The Corporation agrees that it may be served with process in the State of Connecticut in any proceeding for the collection and enforcement of its liabilities, and irrevocably appoints the Connecticut Secretary of the State as its agent to accept service of process in any such suit or proceeding. The Connecticut Secretary of the State shall mail a copy of any such process to the Corporation at

4-B Christopher Columbus Avenue
Danbury, CT 06810

IN WITNESS WHEREOF, the Corporation has caused this Statement of Domestication to be signed by its duly authorized President as of August 4th, 2021.

AEROETCH HOLDINGS, INC.

By: 

Graves Kiely

Its President, Duly Authorized



Secretary of the State of Connecticut

PHONE: 860-509-6803 • EMAIL: crd@ct.gov • WEB: www.concord-sats.ct.gov

OFFICE USE ONLY

CERTIFICATE OF INCORPORATION STOCK CORPORATION

- Use ink. • Print or type.
- Attach additional 8½ x 11 sheets if necessary.

FILING PARTY <i>(Confirmation will be sent to this address):</i> NAME: Hillel Goldman ADDRESS: 148 Deer Hill Avenue CITY: Danbury STATE: CT ZIP: 06810 -		FILING FEE: \$250 <i>Includes franchise tax up to 20,000 shares *</i> <i>Make checks payable to "Secretary of the State"</i>						
1. NAME OF CORPORATION <i>(required)</i> <i>(Must include business designation, e.g., Inc., Co., Corp.):</i> AeroEtch Holdings, Inc.								
2. TOTAL NUMBER OF AUTHORIZED SHARES: 20,000								
<i>If the corporation has more than one class of shares, it must designate each class and the number of shares authorized within each class below.</i>								
CLASS: The Corporation shall have one class of capital stock, to be known as Common Stock, without par value, and the Corporation shall be authorized to issue up to 20,000 shares of said stock.	NUMBER OF SHARES PER CLASS: 20,000							
3. IF MORE THAN ONE CLASS OF SHARES, SET FORTH THE TERMS, LIMITATIONS, RELATIVE RIGHTS AND PREFERENCES OF EACH CLASS OF SHARES AND SERIES THEREOF PURSUANT TO CONN. GEN. STAT. SECTION 33-665: N/A								
4. E-MAIL ADDRESS <i>(optional)</i> gmk7692@gmail.com <input type="checkbox"/> None	5. NAICS CODE <i>(six digits)</i> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">3</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">7</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px; text-align: center;">5</td> </tr> </table>		3	2	7	2	1	5
3	2	7	2	1	5			

* The minimum franchise tax must be paid by corporations which authorize 20,000 shares or less upon incorporation. Corporations which authorize more than 20,000 shares must pay a franchise tax calculated on a sliding scale set forth in Section 33-618 of the General Statutes.



Secretary of the State of Connecticut

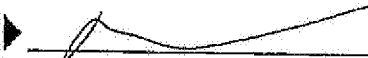
PHONE: 860-509-6003 • EMAIL: crd@ct.gov • WEB: www.concord-sols.ct.gov

OFFICE USE ONLY

NOTE: COMPLETE EITHER 6A OR 6B BELOW, NOT BOTH.

6. APPOINTMENT OF REGISTERED AGENT (required)

If Agent is an individual, print or type full legal name: Hillel Goldman, Esq.

Signature accepting appointment 

BUSINESS ADDRESS (required):
(P.O. Box unacceptable)

Check box if none:

STREET: 148 Deer Hill Avenue

CITY: Danbury

STATE: CT ZIP: 06810 -

CONNECTICUT RESIDENCE ADDRESS (required):
(P.O. Box unacceptable)

STREET: 148 Deer Hill Avenue

CITY: Danbury

STATE: CT ZIP: 06810 -

CONNECTICUT MAILING ADDRESS (required):

STREET OR P.O. BOX: 148 Deer Hill Avenue


CITY: Danbury

STATE: CT ZIP: 06810 -

NOTE: DO NOT COMPLETE 6B IF AGENT APPOINTED IN 6A ABOVE.

If Agent is a business,

print or type name of business as it appears on our records: _____

Signature accepting appointment
on behalf of agent: 

Print full name and title of person signing on behalf of agent: _____

CONNECTICUT BUSINESS ADDRESS (required):
(P.O. Box unacceptable)

STREET:

CITY:

STATE: CT ZIP: -

CONNECTICUT MAILING ADDRESS (required):

STREET OR P.O. BOX:

CITY:

STATE: CT ZIP: -

7. ELECTION OF BENEFIT CORPORATION STATUS (MUST check box if applicable):

The Corporation elects to be a Benefit Corporation. In addition to any other stated purposes for which the corporation is formed, the corporation shall also have the purpose to create a general public benefit as defined in the Connecticut Benefit Corporation Act. [NOTE: If the corporation also seeks to have one or more specific public benefit(s) in addition to the general public benefit, then the corporation must set forth the specific public benefit(s), if any, in Box 8, below, under "Other Provisions."]

8. OTHER PROVISIONS:

The nature of the business to be transacted, and the purposes to be promoted or carried out by the Corporation are to do any lawful act and engage in any lawful business or activity for which Corporations may be formed under the Connecticut Business Corporation Act.





**Secretary of the
State of Connecticut**

PHONE: 860-509-6003 • EMAIL: ord@ct.gov • WEB: www.conincorid-sects.ct.gov

OFFICE USE ONLY

9. EXECUTION: CERTIFICATE MUST BE SIGNED BY EACH INCORPORATOR

Date (mm/dd/yyyy): 07/30/2021

NAME OF INCORPORATOR(S) <i>(print or type)</i>	ADDRESS <i>(No PO Box)</i>	SIGNATURE(S)
Hillel Goldman, Esq.	ADDRESS: 148 Deer Hill Avenue CITY: Danbury STATE: CT ZIP: 06810 -	
	ADDRESS: CITY: STATE: ZIP: -	
	ADDRESS: CITY: STATE: ZIP: -	