

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
Stylesheet Version v1.2

EPAS ID: PAT7274552

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	MERGER AND CHANGE OF NAME
<b>EFFECTIVE DATE:</b>	12/31/2021
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
PF CONSUMER HEALTHCARE 1 LLC	12/22/2021
<b>NEWLY MERGED ENTITY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
GLAXOSMITHKLINE CONSUMER HEALTHCARE HOLDINGS (US) LLC	12/31/2021
<b>MERGED ENTITY'S NEW NAME (RECEIVING PARTY)</b>	
<b>Name:</b>	GLAXOSMITHKLINE CONSUMER HEALTHCARE HOLDINGS (US) LLC
<b>Street Address:</b>	251 LITTLE FALLS DRIVE
<b>City:</b>	WILMINGTON
<b>State/Country:</b>	DELAWARE
<b>Postal Code:</b>	19808
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
Application Number:	16128600
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	
<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>	
<b>Phone:</b>	6109177817
<b>Email:</b>	US_CIPKOP@GSK.COM
<b>Correspondent Name:</b>	GLAXOSMITHKLINE
<b>Address Line 1:</b>	1250 SOUTH COLLEGEVILLE ROAD, UP4110
<b>Address Line 4:</b>	COLLEGEVILLE, PENNSYLVANIA 19426
<b>ATTORNEY DOCKET NUMBER:</b>	CPF72079D1
<b>NAME OF SUBMITTER:</b>	SANDRA MANTON
<b>SIGNATURE:</b>	/SANDRA MANTON/
<b>DATE SIGNED:</b>	04/12/2022
<b>Total Attachments: 2</b>	

source=CPF72079D1\_US\_CERT\_of\_MERGER#page1.tif

source=CPF72079D1\_US\_CERT\_of\_MERGER#page2.tif

# Delaware

The First State

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 MERGER, WHICH MERGES:

"PF CONSUMER HEALTHCARE 1 LLC", A DELAWARE LIMITED LIABILITY COMPANY,

WITH AND INTO "GLAXOSMITHKLINE CONSUMER HEALTHCARE HOLDINGS (US) LLC" UNDER THE NAME OF "GLAXOSMITHKLINE CONSUMER HEALTHCARE HOLDINGS (US) LLC", A LIMITED LIABILITY COMPANY ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE, AS RECEIVED AND FILED IN THIS OFFICE ON THE TWENTY-THIRD DAY OF DECEMBER, A.D. 2021, AT 10:32 O`CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF MERGER IS THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2021.



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

5681752 8100M  
SR# 20214200823

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 205091061  
Date: 12-27-21

**PATENT**  
**REEL: 059711 FRAME: 0129**

**STATE OF DELAWARE**  
**CERTIFICATE OF MERGER OF**  
**DOMESTIC LIMITED LIABILITY COMPANIES**

Pursuant to Title 6, Section 18-209 of the Delaware Limited Liability Act, the undersigned limited liability company executed the following Certificate of Merger:

**FIRST:** The name of the surviving limited liability company is GlaxoSmithKline Consumer Healthcare Holdings (US) LLC,  
and the name of the limited liability company being merged into this surviving limited liability company is PF Consumer Healthcare 1 LLC.

**SECOND:** The Agreement of Merger has been approved, adopted, certified, executed and acknowledged by each of the constituent limited liability companies.

**THIRD:** The name of the surviving limited liability company is GlaxoSmithKline Consumer Healthcare Holdings (US) LLC.

**FOURTH:** The merger is to become effective on December 31, 2021.

**FIFTH:** The Agreement of Merger is on file at 184 Liberty Corner Road, Suite 200, Warren NJ 07059, United States,  
the place of business of the surviving limited liability company.

**SIXTH:** A copy of the Agreement of Merger will be furnished by the surviving limited liability company on request, without cost, to any member of the constituent limited liability companies.

**IN WITNESS WHEREOF**, said surviving limited liability company has caused this certificate to be signed by an authorized person, the 22nd day of December, A.D., 2021.

By: Hatixhe Hoxha  
Authorized Person

Name: Hatixhe Hoxha  
Print or Type

Title: Assistant Secretary