PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT7512601

SUBMISSION TYPE:	RESUBMISSION
NATURE OF CONVEYANCE:	STATEMENT OF CONVERSION
RESUBMIT DOCUMENT ID:	507289764

CONVEYING PARTY DATA

Name	Execution Date
DE NORA WATER TECHNOLOGIES, INC.	06/30/2020

RECEIVING PARTY DATA

Name: DE NORA WATER TECHNOLOGIES, LLC	
Street Address:	3000 ADVANCE LANE
City:	COLMAR
State/Country:	PENNSYLVANIA
Postal Code:	18915

PROPERTY NUMBERS Total: 1

Property Type	Number
Patent Number:	7022233

CORRESPONDENCE DATA

Fax Number: (713)975-0995

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: 18328866845 Email: info@dmiplaw.com

Correspondent Name: D'AMBROSIO & MENON, PLLC

Address Line 1: 3 SUGAR CREEK CENTER BLVD., SUITE 100

Address Line 4: SUGAR LAND, TEXAS 77478

ATTORNEY DOCKET NUMBER:	DN269P-US
NAME OF SUBMITTER:	TANYA TAYLOR
SIGNATURE:	/Tanya Taylor/
DATE SIGNED:	08/30/2022

Total Attachments: 6

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COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

04/01/2022

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

De Nora Water Technologies LLC

I, Leigh M. Chapman, Acting Secretary of the Commonwealth of Pennsylvania, do hereby certify that the foregoing and annexed is a true and correct copy of

Amendment filed on Jun 24, 2020 Effective Jun 30, 2020 - Pages (5)

which appear of record in this department.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC220401100717-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify

Entity#: 711736
Date Filed: 06/24/2020
Effective Date: 06/30/2020
Pennsylvania Department of State

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:		Statement of Conversion		
CSC Order#331992-10 LBY Name				
			DSCB:15-355 (7/1/2015)	
Addre	SS		I HANGIAN INNI HAINI NA IINII ANII	
City	State	Zip Code		
'		•	тс	O200629LP1371
✓Re	turn document by email to: _CSCPa@C	scgiobal.com		
		Read all instructions	pı	
Fee: S	\$70			
	Y.,	46451:1:	manisiana af 15 Da C C	\$ 255 (valations to Statement of
conve	In compliance with the requiremersion, the undersigned association			
	ioreni, une unuerzigire e uccesumer	.,	o o,	V
A. Fo	or the converting association:			
1.	The name of the converting association	ciation is: De Nora W	ater Technologies, Inc.	
2.	The jurisdiction of formation of t	the converting associate	ion is: Pennsylvania	100000000000000000000000000000000000000
3.	The type of association is (check	only one):		
	•	•		_
	☑ Business Corporation	Limited Partnersl		Business Trust
	☐ Nonprofit Corporation ☐ Limited Liability Company		(General) Partnership Limited Partnership	☐ Professional Association ☐ Other
			Limited Fartilersinp	
4.	Date on which the association wa	as created, incorporate	d, formed or otherwise c	ame into existence:
	04/14/1983			
	(MM/DD/YYYY)			
_		1		
5.	If the converting association is a			tion or business trust), the statute
	under which it was first created,			
		•		
	Business Corporation Law of 19 (ex. Business Corporation Law of 1988,		VI aw of 1004 ata)	
	(ex. business Corporation Law of 1988,	Limited Liability Company	y Law 01 1774, CIC.)	

PA DEPT. OF STATE

JUN 2 4 2020

6. Check and complete one of the following addresses for the converting association.

		a domestic filing association, domestic limite the current registered office address as on file voth:			
	(a) 3000 Advance Lane, Colmar,	PA 18915 Montgomery			
<u></u>	Number and street		ate	Zip	County
	(b) c/o:				
	Name of Commercial Register	ed Office Provider			County
	ı	a domestic association that is not a domestic s, including street and number, if any, of its pri	_		or limited
	Number and street	City St	ate	Zip	County
	Number and street	ca registered or similar office, its principal office. City S	tate	Zip	
	For the converted association:				
	1. The name of the converted asso	ciation is: De Nora Water Technologies, LLC			
:	2. The jurisdiction of formation of	the converted association is: Pennsylvania			
	3. The type of association is (check	k only one):			
	☐ Business Corporation ☐ Nonprofit Corporation ☐ Limited Liability Company	☐ Limited Partnership ☐ Limited Liability (General) Partnership ☐ Limited Liability Limited Partnership	□P	Business Trus Professional A Other	

4. Check and complete one of the following addresses for the converted association.

	If the converted association is a domestic filing association, domestic limited liability partnership or registered foreign association, its registered office address. Complete part (a) OR (b) – not both:				hip or		
	(a) 3000 Advance Lane, Col Number and street	lmar, PA 18915-0 Montg City	omery State	Zip	County		
	(b) c/o:Name of Commercial Registered	d Office Provider			County		
	If the converted association is a domestic association that is <i>not</i> a domestic filing association or limited liability partnership, the address, including street and number, if any, of its principal office:				r limited		
	Number and street	City	State	Zip	County		
	If the converted association is a maintained by the law of its jurisd office, its principal office address:	and number, if any, of its iction of formation; or if	registered or similar offic	e, if any, requi			
	Number and street	City	State	Zip			
	(2) The name and address, including	(2) The name and address, including street and number, of its registered agent:					
	Name of Registered Agent						
	Number and street	City	State	Zip			
D. A	Effective date of statement of conv This Statement of Conversion sh This Statement of Conversion sh Approval of conversion by convert For converting association that i Pa.C.S. Chapter 3, Subchapter E For converting association that i of the jurisdiction of formation of	ting association (check of a domestic entity – The conversion). It is a foreign association (check of a foreign association – The conversion).	ng in the Department of S 0/2020 Date (MM/DD/YYYY) nly one): plan of conversion was a The conversion was approion.	tate. at 12:00 a.m Hour (if	any)		
	Attachments (see Instructions for re						
	TESTIMONY WHEREOF, the unde ed by a duly authorized officer there		ation has caused this Stat day ofJune	tement of Conv	rersion to be, 20 <u>20</u>		
			Sign General Counsel and Se	erting Association Au nature ecretary			
			Ti	tle			

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

				<u> </u>	
Ret	urn document by mail to:	Certificate of Organization			
CSC Order#331992-10		Domestic Limited Liability Company			
Name		DSCB:15-8821 (rev. 2/2017)			
Address	5				
City	State Zip Code				
Ret	urn document by email to: cscpa@cscqlobal.com	38	21		
Re	ad all instructions prior to completing. This form may b	e submitted online at https://v	www.corpoi	rations.pa.gov/.	
Fee	e: \$125	ed small business fee exempt	ion (see ins	structions)	
uno	In compliance with the requirements of 15 Pa.C.S. dersigned desiring to organize a limited liability comparate.		of organiza	ation), the	
1.	The name of the limited liability company is: De Nora (designator is required, e.g., "company," "limited" or	Water Technologies LLC ited liability company" or any a	bbreviation i	thereof)	
2.	Complete part (a) or (b) – not both:				
	(a) The address of this limited liability company's registered office in this Commonwealth is: (post office box alone is not acceptable)				
	3000 Advance Lane Colmar	PA	18915	Montgomery	
	Number and Street City	State	Zip	County	
	(b) The name of this limited liability company's comis:	mercial registered office prov	rider and co	unty of venue	
	c/o:				
	Name of Commercial Registered Office Provider	C	ounty		
3.	The name of each organizer is (all organizers must sig	n on page 2):			
	Brent Shelley, Secretary and General Counsel	· · · · · · · · · · · · · · · · · · ·			
					
4.	Effective date of Certificate of Organization (check, an	nd if appropriate complete. or	ne of the fol	llowing):	
7.	The Certificate of Organization shall be effective up			3	
	The Certificate of Organization shall be effective of	00/00/0000	at 12:	00 am	
	The Certificate of Organization shall be effective of	Date (MM/DD/YYYY)		Hour (if any)	

э.	Check the box if the limited liability company is organized to render a restricted professional service and check the type of restricted professional service(s).
	☐ The company is a restricted professional company organized to render the following restricted professional service(s):
	 □ Chiropractic □ Dentistry □ Law □ Medicine and surgery □ Optometry □ Osteopathic medicine and surgery □ Podiatric medicine □ Public accounting □ Psychology □ Veterinary medicine
6.	Benefit companies only. Check the box immediately below if the limited liability company is organized as a benefit company:
	☐ This limited liability company shall have the purpose of creating general public benefit.
	Optional specific public benefit purpose. Check the box immediately below if the benefit company is organized to have one or more specific public benefits and supply the specific public benefit(s). See instructions for examples of specific public benefit.
	This limited liability company shall have the purpose of creating the enumerated specific public benefit(s):
7.	For additional provisions of the certificate, if any, attach 8½ x 11 sheet(s).
IN	TESTIMONY WHEREOF, the organizer(s) has (have) executed this Certificate of Organization this
30	Oth day of June , 20 20 .
	h M
	Signature
	Signature
	Signature

PATENT REEL: 060955 FRAME: 0426

RECORDED: 05/18/2022