PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT7528610

SUBMISSION TYPE:	RESUBMISSION
NATURE OF CONVEYANCE:	CHANGE OF NAME
RESUBMIT DOCUMENT ID:	507307750

CONVEYING PARTY DATA

Name	Execution Date
BIOMETRIC HEALTH GROUP, LLC	10/15/2019

RECEIVING PARTY DATA

Name:	ORTHOGENESYS, INC.
Street Address:	1942 BROADWAY STREET, STE 314C
City:	BOULDER
State/Country:	COLORADO
Postal Code:	80202

PROPERTY NUMBERS Total: 1

Property Type	Number			
Application Number:	16874052			

CORRESPONDENCE DATA

Fax Number: (844)670-6009

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: (512) 770-4200

Email: BZEPEDA@DICKINSON-WRIGHT.COM

Correspondent Name: DICKINSON WRIGHT, PLLC Address Line 1: 1825 EYE ST., NW, SUITE 900 Address Line 4: WASHINGTON, D.C. 80202

ATTORNEY DOCKET NUMBER:	96456-110-RESUBMISSION
NAME OF SUBMITTER:	BEATRICE ZEPEDA
SIGNATURE:	/Beatrice Zepeda/
DATE SIGNED:	09/08/2022

Total Attachments: 12

source=96456-110 RESUBMISSION AssignmentCoverSheet - Biometric Health Group to Ortho#page1.tif source=96456-110 RESUBMISSION AssignmentCoverSheet - Biometric Health Group to Ortho#page2.tif source=96456-110_RESUBMISSION_AssignmentCoverSheet - Biometric Health Group to Ortho#page3.tif source=96456-110 RESUBMISSION AssignmentCoverSheet - Biometric Health Group to Ortho#page4.tif source=96456-110 RESUBMISSION AssignmentCoverSheet - Biometric Health Group to Ortho#page5.tif

source=96456-110_RESUBMISSION_AssignmentCoverSheet - Biometric Health Group to Ortho#page6.tif source=96456-110_RESUBMISSION_AssignmentCoverSheet - Biometric Health Group to Ortho#page7.tif source=96456-110_RESUBMISSION_AssignmentCoverSheet - Biometric Health Group to Ortho#page8.tif source=96456-110_RESUBMISSION_AssignmentCoverSheet - Biometric Health Group to Ortho#page9.tif source=96456-110_RESUBMISSION_AssignmentCoverSheet - Biometric Health Group to Ortho#page10.tif source=96456-110_RESUBMISSION_AssignmentCoverSheet - Biometric Health Group to Ortho#page11.tif source=96456-110_RESUBMISSION_AssignmentCoverSheet - Biometric Health Group to Ortho#page12.tif

ID number



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Colorado Secretary of State

Date and Time: 10/15/2019 07:55 PM

ID Number: 20181806174

Document number: 20191824819

Amount Paid: \$100.00

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Conversion

filed pursuant to § 7-90-201.7 (3) of the Colorado Revised Statutes (C.R.S.)

1.	For the converting entity, its ID number (if applicable), entity name or true name, form of en	ntity,
	jurisdiction under the law of which it is formed, and principal address are	

20181806174

		(Colorado Secretary of State 1D number	r)					
	Entity name or true name	Biometric Health Group, LLC						
	Form of entity	Foreign Limited Liability Company						
	Jurisdiction	Colorado						
	Street address	1942 Broadway Street						
		STE 314C	nber and name)					
		Boulder	CO	80202				
		(City)	(State) United St	(ZIP/Postal Code)				
		(Province – if applicable)	(Country					
	Mailing address							
	(leave blank if same as street address)	(Street number and name	or Post Office Be	ox information)				
		(City)	(State)	(ZIP/Postal Code)				
		(Province – if applicable)	(Country)	<u> </u>				
2. The	e entity name of the resulting entity	is Orthogenesys, Inc.						
	aution: The use of certain terms or abbrev		instructions for	r more information.)				
3. The	e converting entity has been convert	red into the resulting entity purs	suant to section	on 7-90-201.7, C.R.S.				
4. (If a	pplicable, adopt the following statement by ma	rking the box and include an attachment.	.)					
X	This document contains additional							
	ntion: Leave blank if the document does n l consequences. Read instructions before		ating a delayed	effective date has significant				
	e following statement applies, adopt the staten e delayed effective date and, if appli		e					
			(mm/d	ld/yyyy hour:minute am/pm)				
Notica								

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REEL: 061145 FRAME: 0922

such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

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6. The true name and mailing address of the individual causing this document to be delivered for filing are

	Methven	Bruce	E.	
	2232 Sixth Street	(First)	(Middle)	(Suffix
	(Street number	and name or Post Offic	ce Box information)	
	Berkeley, CA	CA	94710	
	(City)	United St	(ZIP/Postal Co	ode)
	(Province-if applicable)	(Country))	
(If applicable, adopt the following statem: This document contains the trucausing the document to be del	e name and mailing address		ditional individua	als

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Colorado Secretary of State

Date and Time: 10/15/2019 07:55 PM

ID Number: 20181806174

Document number: 20191824819

Amount Paid: \$100.00

ABOVE SPACE FOR OFFICE USE ONLY

Articles of Incorporation for a Profit Corporation

filed pursuant to § 7-102-101 and § 7-102-102 of the Colorado Revised Statutes (C.R.S.)

e domestic entity name for the corp	Orthogenesys, Inc.		
aution: The use of certain terms or abbre	viations are restricted by law. Read	l instructions for n	nore information.)
e principal office address of the cor	poration's initial principal off	ice is	
Street address	1942 Broadway Street		
	STE 314C	number and name)	
	Boulder	CO	80202
	(City)	(State) United Sta	(ZIP/Postal Code)
	(Province – if applicable)	(Country)	
Mailing address			
(leave blank if same as street address)	(Street number and na	me or Post Office Bo	ox information)
	(City)	(State)	(ZIP/Postal Code)
	(Province – if applicable)	(Country)	· ·
ne registered agent name and registe Name (if an individual) or	(Last)	(First)	(Middle) (Suffi
(if an entity)	Registered Agents Inc.		
(Caution: Do not provide both an indivi	dual and an entity name.)		
Street address	1942 Broadway Street		
	(Street in STE 314C	number and name)	
	Boulder	<u>CO</u> _	80202
	(City)	(State)	(ZIP/Postal Code)
Mailing address (leave blank if same as street address)	(Street number and na	me or Post Office Bo	ox information)
		CO	

ARTINC_PC Page 1 of 3 Rev. 8/5/2013

(The following statement is adopted by marking the box.)

The person appointed as registered agent above has consented to being so appointed.

4. The true name and mailing address of the incorporator are

Name				
(if an individual)	Methven	Bruce	Emerson	
or	(Last)	(First)	(Middle)	(Suffix)
OI				
(if an entity) (Caution: Do not provide both an in	ndividual and an entity name.)			
Mailing address	2232 Sixth Street			
8	(Street numb	oer and name or Post Offic	e Box information)	
	Berkeley	CA	94710	
	(City)	(State) United	(ZIP/Postal C States .	ode)
	(Province – if applic	rable) (Count	ry)	
The classes of shares and number of follows. The corporation is authorized rights and are entitled to received.	to issue <u>100,000,000</u> com	nmon shares that sha	ll have unlimited v	
O Information regarding shares a attachment.	as required by section 7-10	06-101, C.R.S., is inc	cluded in an	
(If the following statement applies, adopt the	statement by marking the box and	! include an attachment.)		
This document contains addition	onal information as provid	led by law.		
(Caution: Leave blank if the document of significant legal consequences. Read in			ved effective date has	
(If the following statement applies, adopt the The delayed effective date and, if		cument is/are	he required format.) m/dd/yyyy hour:minute o	

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This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is named in the document as one who has caused it to be delivered.

8	The true	name :	and mail	ling addres	s of the	e individr	al causine	the documen	t to be	delivered	I for fil	ling are
ο.	THE HUC	maine a	anu man	ime addica	o or un	c marviat	iai causiiis	z mie documen	טט טו	ucnverec	1 101 111	mig aic

	<u>Methven</u>	Bruce	<u>E.</u>	(Suffix
	(Last)	(First)	(Middle)	
	2232 Sixth Street	,	, ,	. 55
	(Street number	and name or Post Off	fice Box information)	
	Berkeley, CA	CA	94710	
	(City)	(State) United S	(ZIP/Postal Co	ode)
	(Province-if applicable)	(Count	ry)	
(If the following statement applies, ado	pt the statement by marking the box and	l include an attachme	ent.)	
	ue name and mailing address of	of one or more a	dditional individua	als
causing the document to be d	elivered for filing.			

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Statement of Conversion, Additional Information (Biometric Health Group, LLC to Orthogenesys, Inc.)

<u>Attachment 4 – Additional Information as Provided by Law</u>

Each unit of the limited liability company is converted to one share of common stock.

Orthogenesys, Inc. Articles of Incorporation, Additional Information

<u>Attachment 6 – Additional Information as Provided by Law</u>

The initial directors of the corporation shall be Michael Bissonnette, Peter Arn, Sandy Gomberg and Ed Dearborn.

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:59 PM 01/02/2020
FILED 03:59 PM 01/02/2020
SR 20200024645 - File Number 7780124

STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A NON-DELAWARE CORPORATION TO A DELAWARE CORPORATION PURSUANT TO SECTION 265 OF THE DELAWARE GENERAL CORPORATION LAW

1.)	The jurisdiction where the Non-Delaware Corporation first formed is Delaware
2.)	The jurisdiction immediately prior to filing this Certificate is <u>Colorado</u> .
3.)	The date the Non-Delaware Corporation first formed is 12/08/2017
4.)	The name of the Non-Delaware Corporation immediately prior to filing this Certificate is Orthogenesys, Inc.
5.)	The name of the Corporation as set forth in the Certificate of Incorporation is Orthogenesys, Inc.
01	I WITNESS WHEREOF, the undersigned being duly authorized to sign on behalf the converting Non-Delaware Corporation have executed this Certificate on the <u>みゃん</u> day of <u>ゴはれいない</u> , A.D. <u>入〇〇〇</u> .
	By: Dun E Mathrer
	Name: Bruce E. Methven Print or Type
	Title: attorney
	Print or Type

STATE of DELAWARE CERTIFICATE of INCORPORATION A STOCK CORPORATION

- First: The name of this Corporation is Orthogenesys, Inc.
- Second: Its registered office in the State of Delaware is to be located at 2140 S. DuPont Hwy., in the City of Camden, County of Kent, Zip Code 19934.

The registered agent in charge thereof is Paracorp Incorporated.

- Third: The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware.
- Fourth: The amount of the total stock of this corporation is authorized to issue is 20,000,000 shares (number of authorized shares) with a par value of \$0.000001 per share. Paper certificates need not be issued for shares.

• Fifth: The name and mailing address of the incorporator are as follows:

Name: Bruce E. Methven

Mailing Address: 2232 Sixth Street, Berkeley, CA

Zip Code: 94710

• I, The Undersigned, for the purpose of forming a corporation under the laws of the State of Delaware, do make, file and record this Certificate, and do certify that the facts herein stated are true, and I have accordingly hereunto set my hand this

Dad day of January A.D. 20 20.

(Incorporator

NAME: Bruce E. Methven

(type or print)

State of Delaware Secretary of State Division of Corporations Delivered 03:59 PM 01/02/2020 FILED 03:59 PM 01/02/2020 SR 20200024645 - File Number 7780124

RECORDED: 05/27/2022