## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT8144151

| SUBMISSION TYPE:      | NEW ASSIGNMENT            |
|-----------------------|---------------------------|
| NATURE OF CONVEYANCE: | CERTIFICATE OF CONVERSION |

### **CONVEYING PARTY DATA**

| Name                      | Execution Date |
|---------------------------|----------------|
| SMART VENT PRODUCTS, INC. | 06/27/2023     |

### **RECEIVING PARTY DATA**

| Name:             | SMART VENT PRODUCTS LLC |
|-------------------|-------------------------|
| Street Address:   | 14255 US HIGHWAY ONE    |
| Internal Address: | SUITE 217               |
| City:             | JUNO BEACH              |
| State/Country:    | FLORIDA                 |
| Postal Code:      | 33408                   |

### **PROPERTY NUMBERS Total: 23**

| Property Type  | Number   |
|----------------|----------|
| Patent Number: | 10017937 |
| Patent Number: | 10113286 |
| Patent Number: | 10113309 |
| Patent Number: | 10161156 |
| Patent Number: | 10385611 |
| Patent Number: | 10584510 |
| Patent Number: | 10619319 |
| Patent Number: | 10619345 |
| Patent Number: | 11002006 |
| Patent Number: | 11021886 |
| Patent Number: | 8308396  |
| Patent Number: | 9353569  |
| Patent Number: | 9376803  |
| Patent Number: | 9624637  |
| Patent Number: | 9637912  |
| Patent Number: | 9670717  |
| Patent Number: | 9719249  |
| Patent Number: | 9758982  |
| Patent Number: | 9909302  |
|                |          |

PATENT REEL: 064790 FRAME: 0064

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| Property Type       | Number   |
|---------------------|----------|
| Application Number: | 17307229 |
| Patent Number:      | 6287050  |
| Patent Number:      | 9551153  |
| Application Number: | 15167271 |

### **CORRESPONDENCE DATA**

**Fax Number:** (561)659-6313

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: 561-653-5000

Email: ip@akerman.com

Correspondent Name: AKERMAN LLP

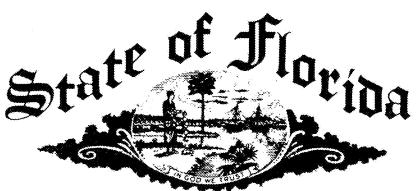
Address Line 1: 777 SOUTH FLAGLER DRIVE
Address Line 2: WEST TOWER, SUITE 1100

Address Line 4: WEST PALM BEACH, FLORIDA 33401

| ATTORNEY DOCKET NUMBER: | 7342-0/S V PRODS PATS |
|-------------------------|-----------------------|
| NAME OF SUBMITTER:      | MARK D. PASSLER       |
| SIGNATURE:              | /Mark D. Passler/     |
| DATE SIGNED:            | 08/31/2023            |

#### **Total Attachments: 5**

source=CONVERSION TO SMART VENT PRODUCTS LLC#page1.tif source=CONVERSION TO SMART VENT PRODUCTS LLC#page2.tif source=CONVERSION TO SMART VENT PRODUCTS LLC#page3.tif source=CONVERSION TO SMART VENT PRODUCTS LLC#page4.tif source=CONVERSION TO SMART VENT PRODUCTS LLC#page5.tif



## Department of State

I certify from the records of this office that a Certificate of Conversion was filed on June 28, 2023, converting SMARTVENT PRODUCTS, INC, a Florida Corporation, to form SMART VENT PRODUCTS LLC, the resulting limited liability company

The document number of the resulting limited liability company is L23000308376.

Given under my hand and the

CR2E022 (01-11)

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Fifteenth day of August, 2023

> Cord Byrd 7 Secretary of State

### **Articles of Conversion**

For

## "Other Business Entity"

Into

### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Smart Vent Products, Inc.  |
|--|
| (Enter Name of Other Business Entity)  |
| 2. The "Other Business Entity" is aCorporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.                                    |
| ( and entry type: Example: corporation, inflited particismp, general partnersmp, common law or business trust, etc   |
| First organized, formed or incorporated under the laws ofFlorida   |
| (Enter state, or if a non-U.S. entity, the name of the country)  |
| on February 10, 2006 (date of organization, formation or incorporation)  3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:                     |
| Smart Vent Products LLC  |
| (Enter Name of Florida Limited Liability Company)  |
| 4. If not effective on the date of filing, enter the effective date:   |
| (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)                          |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |
| 5. The plan of conversion has been approved in accordance with all applicable statutes.  |
| 6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.           |
|  |

REEL: 064790 FRAME: 0067

| Signed this 1274 day of June  | 20_23  |
|---|--|
| Signature of Authorized Representative of Lin   | ited Linburty Company:   |
| Signature of Authorized Representative: Printed Name: Thomas S. Little, Jr.   | Jane James   |
| Signature(s) on behalf of Other Business Entity:  | [See below for required signature(s)]                          |
| Signature: Michael & Minh   |  |
| Printed Name: Michael . Greham  | Title: CEO   |
| Signature:  |  |
| Printed Name: Thomas S. Little, Jr.   | Title: President   |
| Signature:  |  |
| Signature: Printed Name:  | Title:   |
| Signature:  |  |
| Printed Name:   | Title:   |
| Signature;  |  |
| Printed Name:   | Title:   |
| Signature:  |  |
| Printed Name:   | Title:   |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In | Officer.<br>comporator must sign.                              |
| If Florida General Partnership or Limited Liabili   | •  |
| Signature of one General Partner.   |  |
| <u> If Florida Limited Partnership or Limited Liabili</u><br>Signatures of <u>ALL</u> General Partners.                           | ty Limited Partnership;  |
| All others: Signature of an authorized person.  |  |
| Fccs:   |  |
| Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:                         | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) |

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

|   | Smart Vent Pr   | oducts LLC  |  |                                      |
|---|---|---|--|--------------------------------------|
| (Must   | contain the words "Limited Linf   | ollity Company, "Т.   | .L.C.," or "LLC.")   |                                      |
| ARTICLE II - Add<br>The mailing address                         |   | principal offic   | ce of the Limited Liability Co.  | mpany is:                            |
| Principal Office Ad   | dress:  | Mailing /   | Address:   |                                      |
| 14255 US Highwa   | y One   | 14255 ປະ  | S Highway One  |                                      |
| Suite #217  |   | Suite #   |  |                                      |
| Juno Beach, FL  | 33408   | _Juno Bea   | ach, FL 33408  |                                      |
| The name and the lac  | orida street address of the<br>C T Corporation Sy   |   | ent arc:   |                                      |
| _   | Nar<br>1200 South Pine Islan  | me  | -  |                                      |
| <br>1   | Florida street address (P.  | O. Desa NOW   |  |                                      |
|   | Plantation  | 0. вох <u>110 г</u><br>FL   | ассертанте)<br>33324   |                                      |
|   | City  | <del></del>   | Zip  |                                      |
| tiaotity compan<br>registered agent and<br>statutes relating to | y at the place designated of agree to act in this capa of the proper and complete ations of my position as re | in this certifica<br>acity. I further<br>eperformance d<br>egistered agent<br>dephanie Henc | ice of process for the above state, I hereby accept the appoint agree to comply with the provious of my duties, and I am familiant as provided for in Chapter 60 tz. Assistant Secretary | ment as<br>isions of ail<br>with and |
|   | (CONTR  | NUED)   |  |                                      |

| Litle:  | Name and Address:  |
|---|--|
| 'AMBR" = Authorized Member  | Name and Addi CSS.   |
| 'MGR" = Manager   |  |
| AMBR  | Michael J. Graham  |
| · · · · · · · · · · · · · · · · · · ·   | 14255 US Righway One, Suite #21  |
|   | Juno Beach, FL 33408   |
| AMBR  | Thomas S. Little, Jr.  |
|   | ·  |
|   | 19 Mantua Road   |
|   | Mount Royal, NJ 08061  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| · · · · · · · · · · · · · · · · · · ·   |  |
|   |  |
| EV: Other provisions, if any.   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| EQUIRED SIGNATURE:  | , (VV) (S)   |
| EEQUIRED SIGNATURE:   | al Who Cour high   |
| John ho   | ul IN ha Cour De   |
| Signature of a member or a This document is executed in accordance vany false information submitted in a document   | in authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware   |
| Signature of a member or a This document is executed in accordance vany false information submitted in a document as provided for in s.817.155, F.S.      | an authorized representative of a member with section 605.0203 (I) (b), Florida Statutes. I am aware that to the Department of State constitutes a third degree f  |
| Signature of a member or a This document is executed in accordance vany false information submitted in a document as provided for in s.817.155, F.S.  R16 | an authorized representative of a member with section 605.0203 (I) (b), Florida Statutes, I am aware the to the Department of State constitutes a third degree for the Constitutes at th |
| Signature of a member or a This document is executed in accordance vany false information submitted in a document as provided for in s.817.155, F.S.  R16 | an authorized representative of a member with section 605.0203 (I) (b), Florida Statutes. I am aware that to the Department of State constitutes a third degree f  |

ARTICLE IV-

**RECORDED: 08/31/2023**