## 508607696 06/18/2024 PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 Assignment ID: PATI306281

SUBMISSION TYPE:		NEW ASSIGNMENT	
NATURE OF CONVEYANCE:		CHANGE OF NAME	
CONVEYING PARTY DA	ΑΤΑ		
		Name	Execution Date
Janssen BioPharma, Inc.			12/30/2021
RECEIVING PARTY DA	ТА		
Company Name:	Janssen BioPharma, LLC		
Street Address:	260 E. Grand Avenue, 2nd Floor		
City:	South San Francisco		
State/Country:	CALIFORNIA		
Postal Code:	94080		
PROPERTY NUMBERS	Total: 1		1
Property Type		Number	-
Application Number:	17	7836763	
	. — .		
		-04040700	
CORRESPONDENCE D Fax Number:	65	504940792 <b>be e-mail address first: if that is up</b>	successful it will be sent
Fax Number: Correspondence will be	େ e sent to t	504940792 <b>he e-mail address first; if that is uns</b> <b>if that is unsuccessful, it will be ser</b>	
Fax Number: <i>Correspondence will be</i> <i>using a fax number, if p</i>	6؛ e sent to t provided;	he e-mail address first; if that is un	
Fax Number: Correspondence will be	65 <b>e sent to t</b> provided; (6	he e-mail address first; if that is uns if that is unsuccessful, it will be ser	
Fax Number: <i>Correspondence will be using a fax number, if p</i> Phone: Email: Correspondent Name:	65 <b>e sent to t</b> provided; (6 ea G	<i>he e-mail address first; if that is uns if that is unsuccessful, it will be ser</i> 50)813-5600 arreola@mofo.com abrielle C. Hoover	
Fax Number: <i>Correspondence will be</i> <i>using a fax number, if p</i> Phone: Email: Correspondent Name: Address Line 1:	6! e sent to t provided; (6 ea G G 7!	he e-mail address first; if that is uns if that is unsuccessful, it will be ser 50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road	
Fax Number: <i>Correspondence will be using a fax number, if p</i> Phone: Email: Correspondent Name:	6! e sent to t provided; (6 ea G G 7!	<i>he e-mail address first; if that is uns if that is unsuccessful, it will be ser</i> 50)813-5600 arreola@mofo.com abrielle C. Hoover	
Fax Number: <i>Correspondence will be using a fax number, if µ</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4:	65 e sent to t provided; (6 ea G 75 Pa	he e-mail address first; if that is uns if that is unsuccessful, it will be ser 50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road	
Fax Number: <i>Correspondence will be</i> <i>using a fax number, if µ</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4: ATTORNEY DOCKET NU	65 e sent to t provided; (6 ea G 75 Pa	he e-mail address first; if that is uns if that is unsuccessful, it will be ser 50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018	
Fax Number: <i>Correspondence will be</i> <i>using a fax number, if µ</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4: ATTORNEY DOCKET NUNAME OF SUBMITTER:	65 e sent to t provided; (6 ea G 75 Pa	he e-mail address first; if that is uns if that is unsuccessful, it will be ser 50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018 75698-20024.31	
Fax Number: <i>Correspondence will be</i> <i>using a fax number, if p</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4: ATTORNEY DOCKET NUN NAME OF SUBMITTER: SIGNATURE:	65 e sent to t provided; (6 ea G 75 Pa	he e-mail address first; if that is uns if that is unsuccessful, it will be ser i50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018 75698-20024.31 Evelin Arreola	
Fax Number: <i>Correspondence will be</i> <i>using a fax number, if p</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4: ATTORNEY DOCKET NUNAME OF SUBMITTER: BIGNATURE: DATE SIGNED:	65 e sent to t provided; (6 ea G 75 Pa	he e-mail address first; if that is uns if that is unsuccessful, it will be ser i50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018 75698-20024.31 Evelin Arreola Evelin Arreola	
Fax Number: Correspondence will be using a fax number, if p Phone: Email: Correspondent Name: Address Line 1: Address Line 4: ATTORNEY DOCKET NU NAME OF SUBMITTER: SIGNATURE: DATE SIGNED: Total Attachments: 6 source=3. 75698-20024.xx	68 e sent to t forovided; (6 ea G 75 Pa JMBER:	he e-mail address first; if that is uns if that is unsuccessful, it will be ser i50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018 75698-20024.31 Evelin Arreola Evelin Arreola 06/18/2024	
Fax Number: <i>Correspondence will be</i> <i>using a fax number, if µ</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4: ATTORNEY DOCKET NUNATE OF SUBMITTER: SIGNATURE: DATE SIGNED: Total Attachments: 6 source=3. 75698-20024.x; source=3. 75698-20024.x;	65 e sent to t provided; (6 G G 75 75 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	he e-mail address first; if that is uns if that is unsuccessful, it will be ser i50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018 75698-20024.31 Evelin Arreola Evelin Arreola 06/18/2024 hange Bio Inc. to LLC#page1.tif hange Bio Inc. to LLC#page2.tif	
Fax Number: Correspondence will be using a fax number, if p Phone: Email: Correspondent Name: Address Line 1: Address Line 4: Attorney DOCKET NU NAME OF SUBMITTER: SIGNATURE: DATE SIGNED: Total Attachments: 6 source=3. 75698-20024.xt source=3. 75698-20024.xt	65 e sent to t forovided; (6 ea G 75 Pa JMBER: JMBER: x Name Ch x Name Ch x Name Ch x Name Ch	he e-mail address first; if that is uns if that is unsuccessful, it will be ser i50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018 75698-20024.31 Evelin Arreola Evelin Arreola 06/18/2024 hange Bio Inc. to LLC#page1.tif hange Bio Inc. to LLC#page2.tif hange Bio Inc. to LLC#page3.tif	
Fax Number: Correspondence will be using a fax number, if p Phone: Email: Correspondent Name: Address Line 1: Address Line 4: Address Line 4: ATTORNEY DOCKET NU NAME OF SUBMITTER: SIGNATURE: DATE SIGNED: Total Attachments: 6 source=3. 75698-20024.x: source=3. 756	65 e sent to t provided; (6 ea G 75 P 7 <b>JMBER:</b> JMBER: X Name Ch x Name Ch x Name Ch x Name Ch	he e-mail address first; if that is uns if that is unsuccessful, it will be ser i50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018 75698-20024.31 Evelin Arreola Evelin Arreola 06/18/2024 hange Bio Inc. to LLC#page1.tif hange Bio Inc. to LLC#page3.tif hange Bio Inc. to LLC#page4.tif	
Fax Number: Correspondence will be using a fax number, if p Phone: Email: Correspondent Name: Address Line 1: Address Line 1: Address Line 4: ATTORNEY DOCKET NU NAME OF SUBMITTER: SIGNATURE: DATE SIGNED: Total Attachments: 6 source=3. 75698-20024.x; source=3. 75698-20024.x; source=3. 75698-20024.x; source=3. 75698-20024.x;	65 e sent to t forovided; (6 ea G 75 Pa JMBER: JMBER: X Name Ch x Name Ch x Name Ch x Name Ch x Name Ch x Name Ch	he e-mail address first; if that is uns if that is unsuccessful, it will be ser i50)813-5600 arreola@mofo.com abrielle C. Hoover 55 Page Mill Road alo Alto, CALIFORNIA 94304-1018 75698-20024.31 Evelin Arreola Evelin Arreola 06/18/2024 hange Bio Inc. to LLC#page1.tif hange Bio Inc. to LLC#page2.tif hange Bio Inc. to LLC#page3.tif	

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE CORPORATION UNDER THE NAME OF "JANSSEN BIOPHARMA, INC." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "JANSSEN BIOPHARMA, INC." TO "JANSSEN BIOPHARMA, LLC", FILED IN THIS OFFICE ON THE THIRTIETH DAY OF DECEMBER, A.D. 2021, AT 10:37 O`CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF CONVERSION IS THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2021 AT 11:59 O'CLOCK P.M.



4088383 8100V SR# 20214261723

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202326440 Date: 01-05-22

PATENT REEL: 067778 FRAME: 0814

## STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A CORPORATION TO A LIMITED LIABILITY COMPANY PURSUANT TO SECTION 18-214 OF THE LIMITED LIABILITY COMPANY ACT OF THE STATE OF DELAWARE

- 1.) The jurisdiction where the corporation first formed is Delaware.
- 2.) The jurisdiction immediately prior to filing this Certificate is Delaware.
- 3.) The date the corporation first incorporated is February 15, 2006.
- 4.) The name of the corporation immediately prior to filing this Certificate is Janssen BioPharma, Inc.
- 5.) The name of the limited liability company as set forth in the Certificate of Formation is Janssen BioPharma, LLC.
- 6.) The effective date of the conversion is December 31, 2021 at 11:59 PM (EST).

(signature page follows)

State of Delaware Secretary of State Division of Corporations Delivered 10:37 AM 12/30/2021 FILED 10:37 AM 12/30/2021 SR 20214261723 - File Number 4088383

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Conversion.

By: <u>Alyson Lawrence</u> Title: Assistant Secretary

Dated: December 16, 2021

[SIGNATURE PAGE OF CERTIFICATE OF CONVERSION]

PATENT **REEL: 067778 FRAME: 0816** 



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "JANSSEN BIOPHARMA, LLC" FILED IN THIS OFFICE ON THE THIRTIETH DAY OF DECEMBER, A.D. 2021, AT 10:37 O`CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF FORMATION IS THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2021 AT 11:59 O'CLOCK P.M.



4088383 8100V SR# 20214261723

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202326440 Date: 01-05-22

PATENT REEL: 067778 FRAME: 0817

Page 1

#### **CERTIFICATE OF FORMATION**

#### OF

### JANSSEN BIOPHARMA, LLC

The undersigned, acting as an authorized person under the Delaware Limited

Liability Company Act of the limited liability company hereinafter named, hereby makes,

acknowledges, and files the following Certificate of Formation:

1. The name of the limited liability company is Janssen BioPharma, LLC.

2. The address of its registered office in the State of Delaware is 1209 Orange Street, in the City of Wilmington, County of New Castle, 19801. The name of its registered agent at such address is The Corporation Trust Company.

3. To the full extent that the laws of Delaware, as they exist on the date hereof or as they may hereafter be amended, permit the limitation or elimination of the liability of officers, no officer of the company shall be personally liable to the limited liability company or its members for damages for breach of any duty owed to the limited liability company. Neither the amendment or repeal of this provision nor the adoption of any provision of this Certificate of Formation which is inconsistent with this provision shall apply to or have any effect on the liability or alleged liability of any such officer of the company for or with respect to any act or omission of such officer occurring prior to such amendment, repeal, or adoption.

4. The effective date of the formation is December 31, 2021, at 11:59 PM (EST).

[Signature Page Follows]

State of Delaware Secretary of State Division of Corporations Delivered 10:37 AM 12/30/2021 FILED 10:37 AM 12/30/2021 SR 20214261723 - File Number 4088383 IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation.

Name: Alyson Lawrence Title: Assistant Secretary Date: December 16, 2021

[SIGNATURE PAGE OF CERTIFICATE OF FORMATION]

PATENT REEL: 067778 FRAME: 0819

**RECORDED: 06/18/2024**