

Tab settings

4-28-03 TRA



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Resubm

original documents or copy thereof.

To the Honorable Commissioner of Patents and

1. Name of conveying party(ies):

Instruments S.A., Inc.

- Individual(s)
- General Partnership
- Corporation-State **Delaware**
- Other

- Association
- Limited Partnership

Additional names(s) of conveying party(ies) Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other **Correction-Correct State of Incorporation**

- Merger
- Change of Name

Execution Date: **11/12/1999 Reel/Frame No. 002524/0608**

2. Name and address of receiving party(ies):

Name: **Jobin Yvon, Inc.**

Internal Address:

Street Address: **3880 Park Avenue**

City: **Edison** State: **NJ** ZIP: **08820**

- Individual(s) citizenship
- Association
- General Partnership
- Limited Partnership

Corporation-State **Delaware**

Other

If assignee is not domiciled in the United States, a domestic designation is Yes No

(Designations must be a separate document from

Additional name(s) & address(es) Yes No

4. Application number(s) or registration numbers(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

928,270

Additional numbers

Yes No

OFFICE OF PUBLIC RECORDS
2003 APR 28 PM 2:16
FINANCE SECTION

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: **Anthony H. Handal**

Internal Address: **Handal & Morofsky**

Street Address: **80 Washington Street**

City: **Norwalk** State: **CT** ZIP: **06854**

6. Total number of applications and registrations involved:.....

1

7. Total fee (37 CFR 3.41):.....\$ **40.00**

Enclosed

Authorized to be charged to deposit account

8. Deposit account number:

08-0570

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Anthony H. Handal

Name of Person Signing

Signature

April 22, 2003

Date

Total number of pages including cover sheet, attachments, and

8

TRADEMARK

REEL: 002721 FRAME: 0287

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Instruments S.A., Inc.

12-2-02

- Individual(s)
- General Partnership
- Corporation-State
- Other
- Association
- Limited Partnership

Additional name(s) of conveying party(ies) attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other Correction-Correct State of Incorp.
- Merger
- Change of Name

Execution Date: _____

2. Name and address of receiving party(ies)

Name: Jobin Yvon, Inc.

Internal

Address: _____

Street Address: 3880

City: Edison State: NJ Zip: 08820

- Individual(s) citizenship
- Association
- General Partnership
- Limited Partnership
- Corporation-State Delaware
- Other

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)
Additional name(s) & address(es) attached? Yes No

4. Application number(s) or registration number(s):

A. Trademark Application No.(s) _____

B. Trademark Registration No.(s) 928,270

Additional number(s) attached Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Anthony H. Handal

Internal Address: _____

Street Address: 80 Washington Street

City: Norwalk State: CT Zip: 06854

6. Total number of applications and registrations involved: _____

1

7. Total fee (37 CFR 3.41).....\$ 40.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

08-0570

DO NOT USE THIS SPACE

9. Signature.

Anthony H. Handal

Name of Person Signing

Signature

November 25, 2002

Date

Total number of pages including cover sheet, attachments, and document: 5

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Mail documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

40.00 CH

TRADEMARK
REEL: 002721 FRAME: 0288

08/09/2002
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Form PTO-1594 (Rev. 03/01) OMB No. 0651-0027 (exp. 5/31/2002)		RECORDATION FORM COVER SHEET TRADEMARKS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
Tab settings					
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies): Instruments S.A., Inc.			2. Name and address of receiving party(ies) Name: Jobin Yvon, Inc. Internal Address: _____ Street Address: 3880 Park Avenue City: Edison State: NJ Zip: 08820		
<input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State Delaware <input type="checkbox"/> Other _____			<input type="checkbox"/> Individual(s) citizenship _____ <input type="checkbox"/> Association _____ <input type="checkbox"/> General Partnership _____ <input type="checkbox"/> Limited Partnership _____ <input checked="" type="checkbox"/> Corporation- State Delaware Delaware _____ <input type="checkbox"/> Other _____		
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
3. Nature of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input checked="" type="checkbox"/> Change of Name <input type="checkbox"/> Other _____			Execution Date: _____		
4. Application number(s) or registration number(s): A. Trademark Application No.(s)			B. Trademark Registration No.(s) 928,270		
Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: Anthony H. Handal Internal Address: _____ Street Address: 80 Washington Street City: Norwalk State: CT Zip: 06854			6. Total number of applications and registrations involved: 1		
			7. Total fee (37 CFR 3.41)..... \$ 40.00 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account		
			8. Deposit account number: 08-0570 <small>(Attach duplicate copy of this page if paying by deposit account)</small>		
DO NOT USE THIS SPACE					
9. Statement and signature. <i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.</i>					
Anthony H. Handal Name of Person Signing			 Signature		August 9, 2002 Date
Total number of pages including cover sheet, assignments, and documents: <input type="checkbox"/>					

All documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "INSTRUMENTS S.A., INC.", CHANGING ITS NAME FROM "INSTRUMENTS S.A., INC." TO "JOBIN YVON INC.", FILED IN THIS OFFICE ON THE TENTH DAY OF NOVEMBER, A.D. 1999, AT 9 O'CLOCK A.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.



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Edward J. Freel, Secretary of State

AUTHENTICATION 0077331
DATE 11-12-99