

TRADEMARK ASSIGNMENT

Electronic Version v1.1  
 Stylesheet Version v1.1

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	MERGER
<b>EFFECTIVE DATE:</b>	12/15/2010

**CONVEYING PARTY DATA**

Name	Formerly	Execution Date	Entity Type
Filtration Group, Incorporated		12/15/2010	CORPORATION: OHIO

**RECEIVING PARTY DATA**

<b>Name:</b>	Filtration Group LLC
<b>Street Address:</b>	912 E. Washington Street
<b>City:</b>	Joliet
<b>State/Country:</b>	ILLINOIS
<b>Postal Code:</b>	60433
<b>Entity Type:</b>	LIMITED LIABILITY COMPANY: DELAWARE

**PROPERTY NUMBERS Total: 18**

Property Type	Number	Word Mark
Registration Number:	2878001	TITAN
Registration Number:	2866911	NOVAPLEAT
Registration Number:	3091125	AEROSTARSENTINEL
Registration Number:	3121979	GEOPLEAT
Registration Number:	3408344	AEROSORB
Registration Number:	3378361	WHEN CLEAN AIR MATTERS
Registration Number:	3533974	UNISHIELD
Registration Number:	3594797	SUPERNOVA
Registration Number:	3594845	VIOSTAR
Registration Number:	3814075	FILTERWERKS
Registration Number:	3928613	NEXFIL
Registration Number:	2389127	AEROSTAR
Registration Number:	2466883	FILTRATION GROUP

CH \$465.00 2878001

Registration Number:	2326162	HEGA
Registration Number:	2348783	FLOWSTAR
Registration Number:	2398245	MICRATEX
Registration Number:	2304726	SONIQ
Registration Number:	2571773	FILTERWORKS

**CORRESPONDENCE DATA**

Fax Number: 3126095005

*Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.*

Phone: 312-609-7897

Email: hmiller@vedderprice.com

Correspondent Name: Holly Miller

Address Line 1: 222 North LaSalle Street - 24th Floor

Address Line 4: Chicago, ILLINOIS 60601

ATTORNEY DOCKET NUMBER:	00985.00.0070
NAME OF SUBMITTER:	Holly Miller
Signature:	/Holly Miller/
Date:	05/06/2012

**Total Attachments: 11**

source=Filtration Group - Ohio Certificate of Merger#page1.tif  
source=Filtration Group - Ohio Certificate of Merger#page2.tif  
source=Filtration Group - Ohio Certificate of Merger#page3.tif  
source=Filtration Group - Ohio Certificate of Merger#page4.tif  
source=Filtration Group - Ohio Certificate of Merger#page5.tif  
source=Filtration Group - Ohio Certificate of Merger#page6.tif  
source=Filtration Group - Ohio Certificate of Merger#page7.tif  
source=Filtration Group - Ohio Certificate of Merger#page8.tif  
source=Filtration Group - Ohio Certificate of Merger#page9.tif  
source=Filtration Group - Ohio Certificate of Merger#page10.tif  
source=Filtration Group - Ohio Certificate of Merger#page11.tif



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/15/2010	201034900161	MERGED OUT OF EXISTENCE (MEX)	125.00	300.00		.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

CT CORPORATION SYSTEM  
 4400 EASTON COMMONS WAY, SUITE 125  
 TIMOTHY ROBERTSON  
 COLUMBUS, OH 43219

**STATE OF OHIO**  
**CERTIFICATE**

**Ohio Secretary of State, Jennifer Brunner**

608712

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**FILTRATION GROUP, INCORPORATED**

and, that said business records show the filing and recording of:

Document(s)

**MERGED OUT OF EXISTENCE**

Document No(s):

**201034900161**



United States of America  
 State of Ohio  
 Office of the Secretary of State

Witness my hand and the seal of  
 the Secretary of State at Columbus,  
 Ohio this 15th day of December,  
 A.D. 2010.

Ohio Secretary of State



Form 551 Prescribed by the: Ohio Secretary of State  
Central Office: (614) 466-3916  
Toll Free: (877) SOS-FILE (767-3453)  
www.sos.state.oh.us  
Busserv@sos.state.oh.us

Expedite this form: (select one)  
Mail form to one of the following:  
 Expedite PO Box 1090  
Columbus, OH 43216  
 Requires an additional fee of \$100  
 Non Expedite PO Box 1029  
Columbus, OH 43216

**CERTIFICATE OF MERGER**  
Filing Fee \$125  
(154-MER)

In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings banks, savings and loan associations, limited liability companies, partnerships, limited partnerships and/or limited liability partnerships, desiring to effect a merger, set forth the following facts

I. **SURVIVING ENTITY**

A. Name of the entity surviving the merger Filtration Group LLC

B. Name Change: As a result of this merger, the name of the surviving entity has been changed to the following

(Complete only if name of surviving entity is changing through the merger)

C. The surviving entity is a (Please check the appropriate box and fill in the appropriate blanks)

Domestic (Ohio) For-Profit Corporation, charter number \_\_\_\_\_

Domestic (Ohio) Nonprofit Corporation, charter number \_\_\_\_\_

Foreign (Non-Ohio) For-Profit Corporation incorporated under the laws of the jurisdiction of \_\_\_\_\_ and licensed to transact business in the state of Ohio under license number \_\_\_\_\_

Foreign (Non-Ohio) For-Profit Corporation incorporated under the laws of the jurisdiction of \_\_\_\_\_ and NOT licensed to transact business in the state of Ohio

Foreign (Non-Ohio) Nonprofit Corporation under the laws of the jurisdiction of \_\_\_\_\_ and licensed to transact business in the state of Ohio under license number \_\_\_\_\_

Foreign (Non-Ohio) Nonprofit Corporation under the laws of the jurisdiction of \_\_\_\_\_ and NOT licensed to transact business in the state of Ohio

Domestic (Ohio) For-Profit Limited Liability Company, with registration number \_\_\_\_\_

Domestic (Ohio) Nonprofit Limited Liability Company, with registration number \_\_\_\_\_

Foreign (Non-Ohio) For-Profit Limited Liability Company organized under the laws of the jurisdiction of \_\_\_\_\_ registered to do business in the state of Ohio under registration number \_\_\_\_\_

Foreign (Non-Ohio) For-Profit Limited Liability Company organized under the laws of the jurisdiction of Delaware and NOT registered to do business in the state of Ohio

- Foreign (Non-Ohio) Nonprofit Limited Liability Company organized under the laws of the jurisdiction of \_\_\_\_\_ and registered to do business in the state of Ohio under registration number \_\_\_\_\_
- Foreign (Non-Ohio) Nonprofit Limited Liability Company organized under the laws of the jurisdiction of \_\_\_\_\_ and NOT registered to do business in the State of Ohio
- Partnership, registration number, if any, \_\_\_\_\_
- Partnership NOT registered with the state of Ohio \_\_\_\_\_
- Domestic (Ohio) Limited Partnership, with registration number \_\_\_\_\_
- Foreign (Non-Ohio) Limited Partnership organized under the laws of the jurisdiction of \_\_\_\_\_ and registered to do business in the state of Ohio under registration number \_\_\_\_\_
- Foreign (Non-Ohio) Limited Partnership organized under the laws of the jurisdiction of \_\_\_\_\_ and NOT registered to do business in the state of Ohio
- Domestic (Ohio) Limited Liability Partnership, with the registration number \_\_\_\_\_
- Foreign (Non-Ohio) Limited Liability Partnership organized under the laws of the jurisdiction of \_\_\_\_\_ and registered to do business in the state of Ohio under registration number \_\_\_\_\_
- Foreign (Non-Ohio) Limited Liability Partnership organized under the laws of the jurisdiction of \_\_\_\_\_ and NOT registered to do business in the state of Ohio

II. CONSTITUENT ENTITY

Provide the name, charter/license/registration number, type of entity, jurisdiction of formation, for each entity merging out of existence. (If this is insufficient space to reflect all merging entities, please attach a separate sheet listing the additional merging entities)

Name	Charter, License, Registration, or Registration Number	Jurisdiction of Formation	Type of Entity
Filtration Group, Incorporated	608712	Ohio	Corporation
_____	_____	_____	_____
_____	_____	_____	_____

III. MERGER AGREEMENT ON FILE

The name and mailing address of the person or entity from whom/which eligible persons may obtain a copy of the merger agreement upon written request

Filtration Group LLC	912 E. Washington Street		
Name	Mailing Address		
Joliet	Illinois	60433	
City	State	Zip Code	

IV. **EFFECTIVE DATE OF MERGER**

This merger is to be effective on \_\_\_\_\_ (The date specified must be on or after the date of the filing; the effective date of the merger cannot be earlier than the date of filing, if no date is specified, the date of filing will be the effective date of the merger).

V. **MERGER AUTHORIZED**

Each constituent entity has complied with all of the laws under which it exists and the laws permit the merger. The agreement of merger is authorized on behalf of each constituent entity and each person who signed the certificate on behalf of each entity is authorized to do so.

VI. **STATEMENT OF MERGER**

Upon filing this Certificate of Merger, or upon such later date as specified herein, the merging entity/entities listed herein shall merge into the listed surviving entity.

VII. **STATUTORY AGENT**

If the surviving entity is a foreign entity **NOT** licensed to transact business in Ohio, **OR** if the surviving entity is a domestic corporation, limited liability company, or limited partnership entity updating its agent information, provide the name and address of statutory agent upon whom any process, notice or demand may be served.

<u>CT Corporation System</u>	<u>1300 E. 9th Street</u>
Name	Mailing Address
<u>Cleveland</u>	<u>Ohio</u> <u>44114</u>
City	State Zip Code

VIII. **ACCEPTANCE OF AGENT**

If the new entity is a domestic corporation, domestic limited liability company, partnership or domestic limited partnership, then the agent must accept appointment.

The undersigned, named herein as the statutory agent upon whom service of process against any constituent entity or the surviving entity may be served, hereby acknowledges and accepts the appointment of statutory agent.

_____	_____
Signature of Agent	Date

If the agent is an individual using a P.O. Box, the agent must check this box to confirm that he or she is an Ohio resident

IX. **AMENDMENTS**

In the case of a merger into a domestic corporation, limited liability company, or limited partnership, any amendments to the articles of incorporation, articles of organization, or certificate of limited partnership of the surviving domestic entity shall be filed with the certificate of merger.

Amendments are attached  No Amendments

X. **REQUIREMENTS OF CORPORATIONS MERGING OUT OF EXISTENCE**

If a domestic or foreign corporation licensed to transact business in Ohio is a constituent entity and the surviving or new entity resulting from the merger is not a domestic or foreign corporation that is to be licensed to transact business in Ohio, the certificate of merger must be accompanied by the affidavits, receipts, certificates, or other evidence required by division (H) of section 1701.86 and division (G) of section 1702.47 of the Revised Code with respect to each domestic corporation, and by the affidavits, receipts, certificates, or other evidence required by division (C) or (D) of section 1703.17 of the Revised Code with respect to each foreign constituent corporation licensed to transact business in Ohio.

**XI QUALIFICATION OR LICENSURE OF FOREIGN SURVIVING ENTITY**

A. The surviving foreign entity desires to transact business in Ohio as a foreign corporation, bank, savings bank, savings and loan, limited liability company, partnership, limited partnership, or limited liability partnership, and hereby appoints the following as its statutory agent upon whom process, notice or demand against the entity may be served in the state of Ohio.

Name _____		Mailing Address _____	
City _____	Ohio _____	State _____	Zip Code _____

If the agent is an individual using a P.O. Box, check the box to confirm that the agent is an Ohio resident.

The surviving foreign corporation, bank, savings bank, savings and loan, limited liability company, limited partnership, or limited liability partnership ("surviving entity") irrevocably consents to (1) service of process on the statutory agent listed above as long as authority of the agent continues, and (2) to service of process upon the Secretary of State of Ohio if the agent cannot be found. If the surviving entity fails to designate another agent, as required by Ohio law, the surviving entity's license or registration to do business in Ohio expires or is canceled.

B. The qualifying entity also states as follows: (Complete only if applicable)

**1. Foreign Qualifying Corporation (Section 1703.04)**

(If the qualifying entity is a foreign corporation, the following information must be completed.)

(a) Name of the corporation in its jurisdiction of formation

\_\_\_\_\_

(b) If the corporate name is not available, the trade name under which it will do business in Ohio

\_\_\_\_\_

(c) Location and complete address of its principal office

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

(d) Name of the county in which its principal office in Ohio, if any, is to be located

\_\_\_\_\_

(e) A brief summary of the corporate purpose to be exercised within Ohio

\_\_\_\_\_

\_\_\_\_\_

(f) To procure a license to transact business in Ohio, a foreign corporation for-profit must file with the secretary of state a certificate of good standing or subsistence, dated not earlier than 90 days prior to the filing of the application, under the seal of the secretary of state, or other proper official, of the jurisdiction under the laws of which said corporation was incorporated, setting forth: (1) the exact corporate title; (2) the date of incorporation; and (3) the fact that the corporation is in good standing or is a subsisting corporation.

**2 Foreign Notice (Section 1703.031)**

(If the qualifying entity is a foreign bank, savings bank, or savings and loan, the following information must be completed.)

(a) Name of the Foreign nationally/federally chartered bank, savings bank, or savings and loan association

\_\_\_\_\_

(b) Any trade name(s) under which the corporation will conduct business in Ohio

\_\_\_\_\_

\_\_\_\_\_

(c) Location of the corporation's main office (Non-Ohio)

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

(d) Principal office location in Ohio

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Ohio State \_\_\_\_\_ Zip Code \_\_\_\_\_

(If there will not be an office in Ohio, please state "None" on the form)

(e) The corporation will exercise the following purpose(s) in Ohio

\_\_\_\_\_

\_\_\_\_\_

**3. Foreign Qualifying Limited Liability Company (Section 1705.54)**

(If the qualifying entity is a foreign limited liability company, the following information must be completed.)

(a) Name of the For-Profit or Nonprofit limited liability company in its jurisdiction of formation

\_\_\_\_\_

(b) Name under which the limited liability company desires to transact business in Ohio (if different from its name in its jurisdiction of formation)

\_\_\_\_\_

(c) The limited liability company was formed on \_\_\_\_\_

Date

under the laws of the jurisdiction of \_\_\_\_\_

Jurisdiction



(d) Address to which interested persons may direct requests for copies of the articles of organization, operating agreement, bylaws, or other charter documents of the company

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

**4. Foreign Qualifying Limited Partnership under section 1782.49**  
(If the qualifying entity is a foreign limited partnership, the following information must be completed.)

(a) Name of the limited partnership \_\_\_\_\_

(b) The limited partnership was formed on \_\_\_\_\_  
Date

Under the laws of the jurisdiction of \_\_\_\_\_  
Jurisdiction

(c) Address of the office of the limited partnership in its jurisdiction of formation

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

(d) Address of the limited partnership's principal office

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

(e) The names and business or residence addresses of the general partners of the partnership are as follows:

_____ Name	_____ Mailing Address
_____ Name	_____ Mailing Address
_____ Name	_____ Mailing Address
_____ Name	_____ Mailing Address

(Please attach additional separate sheet(s) listing other general partners and their addresses as needed)

- (f) The address of the office where a list of the names and business or residence addresses of the limited partners and their respective capital contributions is to be maintained

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

The limited partnership hereby certifies that it shall maintain such records until the registration of the limited partnership in Ohio is canceled or withdrawn.

5. Foreign Qualifying Limited Liability Partnership (Section 1776.86) (if the qualifying entity is a foreign limited liability partnership, the following information must be completed.)

- (a) Name of the partnership

\_\_\_\_\_  
Name must include one of the following phrases or abbreviations: "registered limited liability partnership," "limited liability partnership," "R.L.L.P.," "L.L.P.," "RLLP," or "LLP."

- (b) The partnership was formed under the laws of the jurisdiction of \_\_\_\_\_

- (c) Address of the partnership's chief executive office

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

- (d) If the chief executive office is not in Ohio, the address of any office of the partnership in Ohio, if one exists

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

- (e) Foreign limited liability partnership must attach evidence of existence in its jurisdiction of formation (origin).

(Proceed to page 8 for signatures of authorized officers, partners and representatives.)

DEC.15.2010 12:10AM FGI 815 726 8912

NO.471 P.2

The undersigned constituent entities have caused this certificate of merger to be signed by its duly authorized officers, partners and representatives on the date(s) stated below

Exact name of entity Filtration Group, Incorporated  
 By: [Signature]  
 Title: PRESIDENT President  
 Date: December 4 2010

Exact name of entity Filtration Group LLC  
 By: [Signature]  
 Title: PRESIDENT President  
 Date: December 4 2010

Exact name of entity \_\_\_\_\_  
 By: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

Exact name of entity \_\_\_\_\_  
 By: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

Exact name of entity \_\_\_\_\_  
 By: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Date: \_\_\_\_\_

An authorized representative of each constituent corporation, partnership, or entity must sign the merger certificate (CRC 1701.81(A), 1702.43 (A), 1705.59(A), 1776.70(A), 1782.433(A)).

AFFIDAVIT RELEASES FROM VARIOUS GOVERNMENTAL AUTHORITIES

Filtration Group Incorporated

Exact Name of Corporation

If a foreign or domestic corporation licensed to transact business in Ohio is a constituent entity, the certificate of merger must be accompanied by the affidavits, receipts, certificates, or other evidence as required by Ohio law.

<b>AGENCY</b> Ohio Department of Taxation Dissolution Section 4485 Northland Ridge Blvd. Columbus, Ohio 43229	<b>DATE NOTIFIED</b>  <u>12/14/2010</u>	<b>AGENCY</b> Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-762-4811 Phone: 614-486-2319 Overnight: 4020 East 5th Avenue Columbus, OH 43219-1811	<b>DATE NOTIFIED</b>  <u>12/14/2010</u>  Regular: P.O. Box 182413 Columbus, OH 43218
<b>AGENCY</b> Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, OH 43215	<b>DATE NOTIFIED</b>  <u>12/14/2010</u>	<b>TREASURER</b> The treasurer of any county in which the corporation has personal property:	<b>DATE NOTIFIED</b>        

Note: This affidavit must be signed by one or more persons executing the certificate of merger or by an office of the corporation.

Signature *Brandon H. Ost* Title President  
 Name Brandon H. Ost  
 Mailing Address 912 E. Washington Street  
 City Joliet State IL Zip Code 60433

Acknowledged before me and subscribed in my presence on Date 14th, December, 2010

Seal *Mary Ann McKee*  
 Notary Public  
 Commission Expires 09/22/14  
 Date



**AFFIDAVIT OF PERSONAL PROPERTY**

STATE OF Illinois

County Will SS:

Brandon H. Ost being first duly sworn, deposes and says that he/she is  
Name of Officer

President of Filtration Group Incorporated  
Title of Officer Name of Corporation

and that this affidavit is made in compliance with Section 1701.811(B)(4) of the Ohio Revised Code.

That above-named corporation: (Check one (1) of the following)

- Has no personal property in any county in Ohio
- Is the type required to pay personal property taxes to state authorities only
- Has personal property only in the following county (ies)

and that the net assets of said corporation are sufficient to pay all personal property taxes accrued to date.

Signature: [Handwritten Signature] Title: President  
 Acknowledged before me and subscribed in my presence on Date 14<sup>th</sup>, December, 2010

Seal Mary Ann McKee  
 Notary Public



Expiration date of Notary Public's Commission 09/22/14  
 Date