OP \$40.00 85975555

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 ETAS ID: TM455913

Stylesheet Version v1.2

SUBMISSION TYPE:	NEW ASSIGNMENT
NATURE OF CONVEYANCE:	MERGER
EFFECTIVE DATE:	07/20/2012

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
Nexcyon Pharmaceuticals, Inc.		07/10/2012	Corporation: INDIANA

RECEIVING PARTY DATA

Name:	Nexcyon Pharmaceuticals, Inc.	
Street Address:	644 W. Washington Avenue	
City:	Madison	
State/Country:	WISCONSIN	
Postal Code:	53703	
Entity Type:	Corporation: WISCONSIN	

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Serial Number:	85975555	NEXCYON

CORRESPONDENCE DATA

Fax Number: 6082575444

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: 6082575661

Email: Axley-IPDocket@Axley.com

Correspondent Name: John G. Walsh
Address Line 1: 2 E Mifflin St Ste 200

Address Line 4: Madison, WISCONSIN 53703

ATTORNEY DOCKET NUMBER:	69234
NAME OF SUBMITTER:	John G. Walsh
SIGNATURE:	/John G. Walsh/
DATE SIGNED:	12/26/2017

Total Attachments: 3

source=Articles of Merger - WI (Official File-Stamped) (02251064x9D882)#page1.tif source=Articles of Merger - WI (Official File-Stamped) (02251064x9D882)#page2.tif source=Articles of Merger - WI (Official File-Stamped) (02251064x9D882)#page3.tif

TRADEMARK REEL: 006236 FRAME: 0554 Sec. 180.11045 and 180.1105. Wis Stats.

State of Wisconsin DEPARTMENT OF FINANCIAL INSTITUTIONS Division of Corporate & Consumer Services



ARTICLES OF MERGER Domestic and Foreign For-Profit Corporations

1. Non-Surviving Parties to the Merger:

Corporation Name:	Organized under the
Nexcyon Pharmaceuticals, Inc.	laws of Indiana
	(state or country)
Does the above named non-surviving party have a fee simple ownership interest in estate?	any Wisconsin real
Yes No	
IMPORTANT: If you answer yes, the surviving entity is required to file a report with the Wisconsin De 73.14 of the Wis. Stats. within 60 days after the effective date of the merger. NOTE: Sec. 73.14(2)(a) each day that the report is late, not to exceed \$7,500. You may access the form at: <a <="" href="http://www2.revenuedata.com/http://w</td><td>provides a penalty of \$200 for</td></tr><tr><td>Corporation Name:</td><td>Organized under the
laws of</td></tr><tr><td></td><td>(state or country)</td></tr><tr><td>Does the above named non-surviving party have a fee simple ownership interest in estate? Yes No IMPORTANT: If you answer yes, the surviving entity is required to file a report with the Wisconsin De 73.14 of the Wis. Stats. within 60 days after the effective date of the merger. NOTE: Sec. 73.14(2)(a) each day that the report is late, not to exceed \$7,500. You may access the form at: <td>ot. of Revenue under sec. provides a penalty of \$200 for le.wi.gov/internet/merger.html e non-surviving party</td>	ot. of Revenue under sec. provides a penalty of \$200 for le.wi.gov/internet/merger.html e non-surviving party
Corporation Name:	Organized under the laws of
Nexcyon Pharmaceuticals, Inc.	Wisconsin
	(state or country)
3. Indicate below if the surviving corporation is an indirect wholly owned subsidiary	· · · · · · · · · · · · · · · · · · ·
The surviving corporation is a Domestic or Foreign Business Corporation wholly owned subsidiary or parent and the merger was approved in accordance with the requirements of sec. 180.11045(2) have been satisfied.	
The surviving corporation is not a Domestic or Foreign Business Corpor wholly owned subsidiary or parent.	ation that is an indirect

FILING FEE - \$150.00

TRADEMARK REEL: 006236 FRAME: 0555

4. The plan of merger has been approved and adopted by each corporation that is a party to the merger a required under sec. 180.1103 or 180.1104, Wis. Stats., as applicable.	S
5. A. The articles of incorporation of the surviving corporation are amended as follows:	
OR	
B. If there are no amendments, indicate the name of the corporation that is a party to the merger whose	
articles of incorporation will be the articles of incorporation of the surviving corporation: Nexcyon Pharmaceuticals, Inc.	
nexcyon Fharmaceuticais, inc.	
6. The executed plan of merger is on file at the principal place of business of the surviving corporation.	
7. The surviving corporation will provide a copy of the plan of merger, upon request and without cost, to ar shareholder of a corporation that was a party to the merger or, upon payment to the surviving corporation of	1y of
an amount equal to the cost of producing the copy, to any other interested person.	21.
8. (OPTIONAL) Effective Date and Time of Merger	
These articles of merger, when filed, shall be effective on 7/20/12 (date) at 11:59 PM (time).	
(An effective date declared under this article may not be earlier than the date the document is delivered to	
the department for filing, nor more than 90 days after its delivery. If no effective date and time is declared, the effective date and time will be determined by sec.180.0123.	
9. Executed on July 10, 2012 (date) by the surviving corporation on behalf of all parties	
to the merger. Tele (Signature)	
Mark (X) below the title of the person executing the document. Terrence P. Clark	
Title: ☑ President OR ☐ Secretary (Printed Name) or other officer title	
This document was drafted by: Jonathan L. Schuster (Name the individual who drafted the document)	
(Name the morndural who dialied the document)	

DFI/CORP/2001(R08/11)

TRADEMARK

Fee simple ownership interest Tyes No (for DFI use only)
ARTICLES OF MERGER
Domestic and Foreign Business Corporations

Axley Brynelson, LLP Attn: Jonathan L. Schuster P.O. Box 1767 2 East Mifflin Street, Suite 200 Madison, WI 53701-1767 J

Enter your return address within the bracket above. Phone number during the day: (608) 283 - 6769

INSTRUCTIONS (Ref. Sec. 180.11045 and 180.1105, Wis. Stats. for document content)

Submit one original and one exact copy along with the required filing fee of \$150.00 to the address listed below. Make checks payable to the "Department of Financial Institutions". Filing fee is non-refundable. Sign the document manually or otherwise allowed under 180.0103(16). Mailing Address: Physical Address for Express Mail: Department of Financial Institutions Department of Financial Institutions Phone: 608-261-7577 Division of Corporate & Consumer Division of Corporate & Consumer FAX: 608-267-6813 TTY: 608-266-8818 Services Services 345 W. Washington Ave - 3rd Fl. P O Box 7846 Madison WI 53707-7846 Madison WI 53703

NOTICE: This form may be used to accomplish a filing required or permitted by statute to be made with the department. Information requested may be used for secondary purposes. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.

- 1. Enter the corporation name and state or country of organization of each non-surviving party to the merger. Definitions of foreign entity types are set forth in sec.180.0103 (9), Wis. Stats. Select yes or no to indicate whether the non-surviving party has a fee simple ownership interest in any Wisconsin real estate. See sec. 73.14 and 77.25, Wis. Stats., or contact the Wisconsin Department of Revenue at (608)266-1594 for questions regarding fee simple ownership interest and the filing requirements with that department.
- 2. Enter the corporation name (prior to any amendment to change the name) and state or country of organization of the surviving corporation.
- 3. Indicate whether the surviving corporation is an indirect wholly owned subsidiary or parent. See sec. 180.11045, Wis. Stats, for requirements. See sec. 180.11045(1)(b), Wis. Stats, for definition.
- 4. This statement is required per sec. 180.1105 (1)(cm) of the Wis. Stats.
- 5. A. OR B. Indicate any amendments to the articles of incorporation of the surviving corporation in section A. If there are no amendments, indicate the name of the corporation that is a party to the merger whose articles of incorporation will be the articles of incorporation of the surviving corporation in section B.
- 6. This statement is required per sec. 180.1105(f) of the Wis. Stats.
- 7. This statement is required per sec. 180.1105(g) of the Wis. Stats.
- 8. (Optional) If the merger is to take effect at a time other than the close of business on the day the articles of merger are delivered to the department for filing, state the effective date or date and time. An effective date may not be earlier than the date the document is delivered to the Department of Financial Institutions, nor a date more than 90 days after its delivery.
- 9. Enter the date of execution and the name and title of the person signing the document. If the document is executed in Wisconsin, sec. 182.01(3) provides that it shall not be filed unless the name of the person (individual) who drafted it is printed, typewritten or stamped thereon in a legible manner. If the document is not executed in Wisconsin, enter that remark.

DFI/CORP/2001(R08/11)

REEL: 006236 FRAME: 0557