

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM538899

| | |
|------------------------------|----------------|
| SUBMISSION TYPE: | NEW ASSIGNMENT |
| NATURE OF CONVEYANCE: | MERGER |
| EFFECTIVE DATE: | 06/01/2018 |

CONVEYING PARTY DATA

| Name | Formerly | Execution Date | Entity Type |
|-------------------------|----------|----------------|---|
| Mortara Instrument, LLC | | 05/31/2008 | Limited Liability Company: WISCONSIN |

RECEIVING PARTY DATA

| | |
|------------------------|------------------------|
| Name: | Welch Allyn, Inc. |
| Street Address: | 4341 State Street Road |
| City: | Skaneateles Falls |
| State/Country: | NEW YORK |
| Postal Code: | 13153 |
| Entity Type: | Corporation: NEW YORK |

PROPERTY NUMBERS Total: 12

| Property Type | Number | Word Mark |
|----------------------|---------|------------|
| Registration Number: | 0811773 | BURDICK |
| Registration Number: | 1345899 | BURDICK |
| Registration Number: | 2989028 | ELI |
| Registration Number: | 1503659 | E-SCRIBE |
| Registration Number: | 1827359 | HSCRIBE |
| Registration Number: | 1784660 | M |
| Registration Number: | 1514402 | MORTARA |
| Registration Number: | 2592510 | Q-STRESS |
| Registration Number: | 1704186 | Q-TEL |
| Registration Number: | 1431861 | QUIK-TRACE |
| Registration Number: | 3448610 | VERITAS |
| Registration Number: | 1761202 | X-SCRIBE |

CORRESPONDENCE DATA

Fax Number: 2127352000

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: 2127353000

Email: jselle@skadden.com

TRADEMARK

Correspondent Name: Skadden, Arps, Slate, Meagher & Flom LLP
Address Line 1: Four Times Square
Address Line 2: Attn: Justin Selle
Address Line 4: New York, NEW YORK 10036

ATTORNEY DOCKET NUMBER: 162350/4

NAME OF SUBMITTER: Oren Epstein

SIGNATURE: /OE/

DATE SIGNED: 08/30/2019

Total Attachments: 7

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DOCUMENT
2011

United States of America
State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, Mary Ann McCoshen, Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that the annexed copy has been compared with the document on file in the Corporation Section of the Division of Corporate & Consumer Services of this department, and that the same is a true copy thereof; and that I am the legal custodian of said document, and that this certification is in due form.

IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department.

A handwritten signature in cursive script that reads "Mary Ann McCoshen".

MARY ANN McCOSHEN, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions



DATE: August 27, 2019

BY: Rebecca Lin

Handwritten initials in cursive script, appearing to be "RL".



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

FILING FEE \$150.00

Please check box for (Optional)
Expedited service + \$25.00

**DO NOT STAPLE
FORM 2000**

ARTICLES OF MERGER

Sec. 178.1124, 179.77, 180.1105, 181.1105, and 183.1204
Wis. Stats

1. Non-Surviving Parties to the Merger:

| | | |
|--|---|---|
| Company Name: Mortara Instrument, LLC | | |
| Indicate (X) Entity Type | <input type="checkbox"/> General Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Liability Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Partnership (Ch. 179, Wis. Stats.) <input type="checkbox"/> Business Corporation (Ch. 180, Wis. Stats.) See Exception below <input type="checkbox"/> Nonstock Corporation (Ch. 181, Wis. Stats.) <input checked="" type="checkbox"/> Limited Liability Company (Ch. 183, Wis. Stats.) | Organized under the laws of <u>Wisconsin</u> (state or country) |

| | | |
|-----------------------------|--|--|
| Company Name: | | |
| Indicate (X) Entity Type | <input type="checkbox"/> General Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Liability Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Partnership (Ch. 179, Wis. Stats.) <input type="checkbox"/> Business Corporation (Ch. 180, Wis. Stats.) See Exception below <input type="checkbox"/> Nonstock Corporation (Ch. 181, Wis. Stats.) <input type="checkbox"/> Limited Liability Company (Ch. 183, Wis. Stats.) | Organized under the laws of <u> </u> (state or country) |

EXCEPTION: If the merger involves only Chapter 180 business corporations, use form 2001.
Schedule more non-surviving parties as an additional page

2. Surviving Entity:

| | | |
|------------------------------------|---|--|
| Company Name: Welch Allyn, Inc. | | |
| Indicate (X) Entity Type | <input type="checkbox"/> General Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Liability Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Partnership (Ch. 179, Wis. Stats.) <input checked="" type="checkbox"/> Business Corporation (Ch. 180, Wis. Stats.) See Exception below <input type="checkbox"/> Nonstock Corporation (Ch. 181, Wis. Stats.) <input type="checkbox"/> Limited Liability Company (Ch. 183, Wis. Stats.) | Organized under the laws of <u>New York</u> (state or country) |



DFI/CORP/2000(0703/17)

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3. Indicate below if the surviving entity is an indirect wholly owned subsidiary or parent:

The surviving entity is a Domestic or Foreign Business Corporation that is an indirect wholly owned subsidiary or parent and the merger was approved in accordance with sec. 180.11045 and the requirements of sec. 180.11045(2) have been satisfied.

The surviving entity is not a Domestic or Foreign Business Corporation that is an indirect wholly owned subsidiary or parent.

4. The Plan of Merger included in this document was approved by each entity that is a party to the merger in the manner required by the laws applicable to each entity, and in accordance with ss. 180.1103, 180.1104, 181.1103, 181.1104 and 183.1202, if applicable.

CONTINGENCY STATEMENT - The surviving entity of this merger is a domestic or foreign nonstock corporation. The Plan of Merger included in this document was approved by each entity that is a party to the merger in the manner required by the laws applicable to each entity, and in accordance with ss. 180.1103, 180.1104 and 183.1202, if applicable, and by a person other than the members or the board, if the approval of such person is required under s. 181.1103(2)(c).

The approval of members is not required, and the Plan of Merger was approved by a sufficient vote of the board.

The number of votes cast by each class of members to approve the Plan of Merger were sufficient for approval by that class.

| Membership Class | Number of Memberships Outstanding | Number of Votes Entitled to be Cast | For | Against |
|------------------|-----------------------------------|-------------------------------------|-----|---------|
| | | | | |
| | | | | |

(Append or attach the PLAN OF MERGER, (Optional Plan of Merger template on Pages 3 & 4)

5. (OPTIONAL) Effective Date and Time of Merger

These articles of merger, when filed, shall be effective on June 1, 2018 (date) at 12:01 am (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 ss. 178.0114, 179.11(2), 180.0123, 181.0123 or 183.0111, whichever section governs the surviving domestic entity.)

6. Executed on May 31, 2018 (date) by the surviving entity on behalf of all parties to the merger.



(Signature)

Nathan LaComb

(Printed Name)

Mark (X) below the title of the person executing the document.

For a corporation
Title: President OR Secretary
or other officer title Vice President

For a limited liability company
Title: Member OR Manager

For a limited partnership/general partnership/
limited liability partnership
Title: General Partner Partner

This document was drafted by: Vincent J. Beres
(Name the individual who drafted the document)

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DO NOT STAPLE

Optional Template
Exhibit A
PLAN OF MERGER

1. Non-Surviving Parties to the Merger:

| | | |
|--|---|---|
| Company Name: Mortara Instrument, LLC | | |
| Indicate (X) Entity Type | <input type="checkbox"/> General Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Liability Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Partnership (Ch. 179, Wis. Stats.) <input type="checkbox"/> Business Corporation (Ch. 180, Wis. Stats.) <input type="checkbox"/> Nonstock Corporation (Ch. 181, Wis. Stats.) <input checked="" type="checkbox"/> Limited Liability Company (Ch. 183, Wis. Stats.) | Organized under the laws of <u>Wisconsin</u> (state or country) |

| | | |
|-----------------------------|--|--|
| Company Name: | | |
| Indicate (X) Entity Type | <input type="checkbox"/> General Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Liability Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Partnership (Ch. 179, Wis. Stats.) <input type="checkbox"/> Business Corporation (Ch. 180, Wis. Stats.) <input type="checkbox"/> Nonstock Corporation (Ch. 181, Wis. Stats.) <input type="checkbox"/> Limited Liability Company (Ch. 183, Wis. Stats.) | Organized under the laws of _____ (state or country) |

Schedule more non-surviving parties as an additional page

2. Surviving Entity:

| | | |
|------------------------------------|---|--|
| Company Name: Welch Allyn, Inc. | | |
| Indicate (X) Entity Type | <input type="checkbox"/> General Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Liability Partnership (Ch. 178, Wis. Stats.) <input type="checkbox"/> Limited Partnership (Ch. 179, Wis. Stats.) <input checked="" type="checkbox"/> Business Corporation (Ch. 180, Wis. Stats.) <input type="checkbox"/> Nonstock Corporation (Ch. 181, Wis. Stats.) <input type="checkbox"/> Limited Liability Company (Ch. 183, Wis. Stats.) | Organized under the laws of <u>New York</u> (state or country) |

Optional Template (continued)

3. The manner and basis of converting the interests in each business entity that is a party to the merger into shares, interests, obligations or other securities of the surviving business entity or any other business entity or into cash or other property in whole or in part (required).

As a result of the Merger, upon the Effective Time of the Merger all issued and outstanding membership interests in Non-Survivor shall be cancelled and cease to exist. All stock in Survivor issued and outstanding immediately prior to the Effective Time shall remain outstanding and will not be affected by the Merger.

4. The terms and conditions of the merger.

At the Effective Time of the Merger, Non-Survivor will be merged with and into Survivor in accordance with Wisconsin and New York Statutes. After the Merger, Survivor will be the surviving entity and the separate existence and identity of Non-Survivor shall cease to exist.

5. Other provisions the parties to the merger may elect to include relating to the merger.

All of the property, real and personal, rights, privileges, immunities, powers, purposes, franchises, patents, licenses, trademarks, registrations, causes of action and every other asset of the Non-Survivor shall be transferred to, vest in and devolve upon the Survivor, without further act or deed, and every interest of the Survivor and the Non-Survivor shall be as effectively the property of the Survivor as they were of the Non-Survivor. The Survivor shall assume and be liable for all of the liabilities, obligations and penalties of the Non-Survivor.

6. The articles of incorporation or other similar governing document of the surviving domestic entity is amended as follows:

n/a

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ARTICLES OF MERGER

Brenda Lindsay, Paralegal
 Reinhart Boerner Van Deuren s.c.
 N16W23250 Stone Ridge Drive, Suite One
 Waukesha, WI 53188

▲ Please provide an email or postal mailing address for the filed copy of the document.

Your phone number during the day: 262-851-4609

INSTRUCTIONS (Ref. Sec. 178.1123, 179.77, 180.11045, 180.1105, 181.1105, and 183.1204, Wis. Stats. for document content)

Please use **BLACK** ink. Submit one original to State of WI-Dept. of Financial Institutions, Box 93348, Milwaukee WI, 53293-0348, together with a check for the filing fee payable to the department. Filing fee is non-refundable. (If sent by Express or Priority U.S. mail, please visit www.wdfi.org/contact-us/ for current physical address). This document can be made available in alternate formats upon request to qualifying individuals with disabilities. The original must include an original manual signature. Upon filing, the information in this document becomes public and might be used for purposes other than those for which it was originally furnished. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577. Hearing-impaired may call 711 for TTY.

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 company name, type of entity, and state of organization of each non-surviving party to the merger. Definitions of foreign entity types are set forth in ss. 178.0102(4i) (5) & (6), 179.01(4), 180.0103(9), 181.0103(13) and 183.0102(8), Wis. Stats.
2. Enter the company name, type of entity, and state of organization of the surviving entity.
3. Indicate whether or not the surviving entity is a Domestic or Foreign Corporation that is an indirect wholly owned subsidiary or parent. See sec. 180.11045(1)(b), Wis. Stats. for definition.
4. This Article states the manner in which the Plan of Merger was approved. If the surviving entity is a domestic or foreign nonstock corporation, complete the CONTINGENCY STATEMENT. Append or attach the Plan of Merger. A Plan of Merger template is available on pages 3 & 4. Its use is optional.
5. (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.
6. Enter the date of execution and the name and title of the person signing the document. If, for example, the surviving entity is a domestic limited liability company, the Articles of Merger would be signed by a Member or Manager of the limited liability company; if the surviving entity is a corporation, by an officer of the corporation, etc.

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\2000(07/17)

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TRADEMARK
 REEL: 006733 FRAME: 0479



For Office



**State of Wisconsin
Department of Financial Institutions**

Endorsement

ARTICLES OF MERGER - Ch. 183

MORTARA INSTRUMENT, LLC

Received Date: 5/31/2018

Filed Date: 6/1/2018

Filing Fee: \$150.00

Expedited Fee: \$25.00

Total Fee: \$175.00

Entity ID#: 1M22719

**Articles of Merger, merging MORTARA INSTRUMENT, LLC (a WI domestic LLC)(Chap 183)(Non-Survivor)
into an unlicensed foreign Corporation (Survivor)**

Effective Date: June 1, 2018

OOS# 201805315589541