

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM560353

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	MERGER		
EFFECTIVE DATE:	12/13/2017		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
LunaMetrics LLC		12/09/2017	Limited Liability Company: PENNSYLVANIA
RECEIVING PARTY DATA			
Name:	LunaMetrics LLC		
Street Address:	4115 N. Ravenswood Avenue, Suite 101		
City:	Chicago		
State/Country:	ILLINOIS		
Postal Code:	60613		
Entity Type:	Limited Liability Company: DELAWARE		
PROPERTY NUMBERS Total: 2			
Property Type	Number	Word Mark	
Registration Number:	3297671	LUNAMETRICS	
Registration Number:	3297564	LUNAMETRICS	
CORRESPONDENCE DATA			
Fax Number:	7202743133		
<i>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.</i>			
Phone:	720-598-3456		
Email:	lorri.strizich@wilmerhale.com		
Correspondent Name:	Lorri Strizich		
Address Line 1:	1225 17th Street, Suite 2600		
Address Line 2:	c/o WilmerHale		
Address Line 4:	Denver, COLORADO 80202		
NAME OF SUBMITTER:	Lorri Strizich		
SIGNATURE:	/lorri strizich/		
DATE SIGNED:	02/04/2020		
Total Attachments: 5			
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**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<input type="checkbox"/> Return document by mail to: Name _____ Address _____ City _____ State _____ Zip Code _____ <input type="checkbox"/> Return document by email to: _____	Statement of Merger  TCO171213JM0576
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Read all instructions prior to completing.

Fee: \$70 plus \$40 for *each* association that is a party to the merger
The minimum amount to be submitted with this filing is \$150

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 335 (relating to Statement of merger), the undersigned, desiring to effect a merger, hereby states that:

A. For the surviving association:

1. The name of the surviving association is: LunaMetrics LLC
2. The jurisdiction of formation of the surviving association: Delaware
3. The type of association of the surviving association is (check only one):
 - Business Corporation
 - Nonprofit Corporation
 - Limited Liability Company
 - Limited Partnership
 - Limited Liability (General) Partnership
 - Limited Liability Limited Partnership
 - Business Trust
 - Professional Association
 - Other _____

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4. The surviving association is a (check only one box, provide address and follow instructions for attachments):

- Domestic (Pennsylvania) filing entity already in existence on Department of State records
If applicable, attach to this Statement any amendment to its public organic record approved as part of the plan of merger.
- NEW domestic (Pennsylvania) filing entity (includes limited liability limited partnership)
Attach to this Statement the public organic record of the new entity.
- Foreign filing association or foreign limited liability partnership already registered with the Department.
If applicable, attach to this Statement any amendment to or transfer of its foreign registration approved as part of the plan of merger.
- Foreign filing association or foreign limited liability partnership simultaneously seeking registration with the Department of State
Attach to this Statement a completed form DSCB:15-412 (Foreign Registration Statement) with applicable fee and attachments.

Its current registered office address. Complete part (a) **OR** (b) – not both:

(a) 24 S. 18th Street, Suite 100 Pittsburgh PA 15203 Allegheny
Number and street City State Zip County

(b) c/o: _____
Name of Commercial Registered Office Provider County

- NEW domestic (Pennsylvania) limited liability partnership or electing partnership
Attach completed DSCB:15-8201 (Statement of Registration) or DSCB:15-8701A (Statement of Election)
- Domestic association that is not a domestic filing association
Attach to this Statement tax clearance certificates.

The address, including street and number, if any, of its principal office:

Number and street City State Zip County

- Foreign association that is not, and will not, be registered with the Department of State
Attach to this Statement tax clearance certificates.

The address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office:

Number and street City State Zip

B. For the merging association(s) that are not surviving the merger:

1. The name of the merging association is: LunaMetrics LLC

2. The jurisdiction of formation of the merging association: Pennsylvania

3. The type of association is (check only one):

- | | | |
|---|--|---|
| <input type="checkbox"/> Business Corporation | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Business Trust |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Limited Liability (General) Partnership | <input type="checkbox"/> Professional Association |
| <input checked="" type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Liability Limited Partnership | <input type="checkbox"/> Other _____ |

4. Check and complete one of the following addresses.

<input checked="" type="checkbox"/>	<p>If the merging association is a domestic filing association, domestic limited liability partnership or registered foreign association, the current registered office address as on file with the Department of State. <i>Complete part (a) OR (b) – not both:</i></p> <p>(a) <u>24 S. 17th Street, Suite 100</u> <u>Pittsburgh</u> <u>PA</u> <u>15203</u> <u>Allegheny</u> <small>Number and street City State Zip County</small></p> <p>(b) c/o: _____ <small>Name of Commercial Registered Office Provider County</small></p>
<input type="checkbox"/>	<p>If the merging association is a domestic association that is <i>not</i> a domestic filing association or limited liability partnership, the address, including street and number, if any, of its principal office:</p> <p>_____ <small>Number and street City State Zip County</small></p>
<input type="checkbox"/>	<p>If the merging association is a nonregistered foreign association, the address, including street and number, if any, of its registered or similar office, if any, required to be maintained by the law of its jurisdiction of formation; or if it is not required to maintain a registered or similar office, its principal office address:</p> <p>_____ <small>Number and street City State Zip</small></p>

**Use Statement of Merger – Addendum (DSCB:15-335AD)
 for additional merging parties that are not surviving the merger.**

C. Effective date of statement of merger (check, and if appropriate complete, one of the following):

This Statement of Merger shall be effective upon filing in the Department of State.
This Statement of Merger shall be effective on: _____ at _____
Date (MM/DD/YYYY) Hour (if any)

D. Approval of merger by merging associations (check all applicable statement(s)):


- For domestic entities – The merger was approved in accordance with 15 Pa.C.S. Chapter 3, Subchapter C (relating to merger).
- For foreign associations – The merger was approved in accordance with the laws of the jurisdiction of formation.
- For domestic associations that are not domestic entities – The merger was approved by the interest holders of the merging association in the manner required by its organic law.

E. Attachments (see Instructions for required and optional attachments).

IN TESTIMONY WHEREOF, the undersigned merging associations have caused this Statement of Merger to be signed by duly authorized officers thereof this 9th day of December, 2017.

LunaMetrics LLC

 Name of Merging Association




 Robbin Steif (Dec 9, 2017)
 Signature

 CEO

 Title

LunaMetrics LLC

 Name of Merging Association



 Robbin Steif (Dec 9, 2017)
 Signature

 CEO

 Title

State of Delaware
Certificate of Merger of a Foreign Limited Liability Company
into a Domestic Limited Liability Company

Pursuant to Title 6, Section 18-209 of the Delaware Limited Liability Company Act.

First: The name of the surviving Limited Liability Company is _____
LunaMetrics LLC _____, a Delaware Limited Liability Company.

Second: The name of the Limited Liability Company being merged into this surviving
Limited Liability Company is _____ LunaMetrics LLC _____.
The jurisdiction in which this Limited Liability Company was formed is _____ Pennsylvania _____.

Third: The Agreement of Merger has been approved and executed by both Limited
Liability Companies.

Fourth: The name of the surviving Limited Liability Company is _____
LunaMetrics LLC _____.

Fifth: The executed agreement of merger is on file at _____ 24 S. 18th Street, Pittsburgh PA . 15203 _____

the principal place of business of the surviving Limited Liability Company.

Sixth: A copy of the agreement of merger will be furnished by the surviving Limited
Liability Company on request, without cost, to any member of the Limited Liability
Company or any person holding an interest in any other business entity which is to merge
or consolidate.

IN WITNESS WHEREOF, said Limited Liability Company has caused this certificate
to be signed by an authorized person, this _____ 8th _____ day of _____ December _____, A.D., 2017 _____.

By: _____ *Robbin Steif* _____
Robbin Steif (Dec 8, 2017)
Authorized Person

Name: _____ Robbin Steif _____
Print or Type