OP \$40.00 2577420

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1 ETAS ID: TM639529 Stylesheet Version v1.2

SUBMISSION TYPE: NEW ASSIGNMENT

NATURE OF CONVEYANCE: MERGER

03/28/2018

CONVEYING PARTY DATA

Name	Formerly	Execution Date	Entity Type
OMNIPROBE, INC.		03/28/2018	Corporation: TEXAS

RECEIVING PARTY DATA

Name:	OXFORD INSTRUMENTS AMERICA, INC.
Street Address:	300 BAKER AVENUE, SUITE 150
City:	CONCORD
State/Country:	MASSACHUSETTS
Postal Code:	01742
Entity Type:	Corporation: MASSACHUSETTS

PROPERTY NUMBERS Total: 1

Property Type	Number	Word Mark
Registration Number:	2577420	OMNIPROBE

CORRESPONDENCE DATA

Fax Number: 2022937860

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent voing a few number if provided if that is unsuccessful, it will be sent via US Mail.

using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: 2022937060

Email:tm@sughrue.com, vmullineaux@sughrue.comCorrespondent Name:LEIGH ANN LINDQUIST/SUGHRUE MION, PLLCAddress Line 1:2000 PENNSYLVANIA AVENUE NW, SUITE 900

Address Line 4: WASHINGTON, D.C. 20006

ATTORNEY DOCKET NUMBER:	D6134
NAME OF SUBMITTER:	Leigh Ann Lindquist
SIGNATURE:	/Leigh Ann Lindquist/
DATE SIGNED:	04/15/2021

Total Attachments: 6

source=D6134CertificateofMerger#page1.tif source=D6134CertificateofMerger#page2.tif source=D6134CertificateofMerger#page3.tif source=D6134CertificateofMerger#page4.tif

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Office of the Secretary of State

March 29, 2018

CT Corporation System 701 Brazos, Ste. 720 Austin, TX 78701 USA

RE:

OXFORD INSTRUMENTS AMERICA, INC. (File Number: 11615806)

It has been our pleasure to approve and place on record the filing instrument effecting a merger. The appropriate evidence of filing is attached for your files. Payment of the filing fee is acknowledged by this letter.

If we can be of further service at any time, please let us know.

Sincerely,

Corporations Section
Business & Public Filings Division
(512) 463-5555

Enclosure

Phone: (512) 463-5555

Prepared by: Lisa Sartin

Fax: (512) 463-5709 TID: 10339 TRIADEMIARRIA Services
Document: 803373410002
REEL: 007256 FRAME: 0877

Office of the Secretary of State

CERTIFICATE OF MERGER

The undersigned, as Secretary of State of Texas, hereby certifies that a filing instrument merging

OMNIPROBE, INC.
Domestic For-Profit Corporation
[File Number: 155733700]

Into

OXFORD INSTRUMENTS AMERICA, INC.

Foreign For-Profit Corporation
Massachusetts, USA
[File Number: 11615806]

has been received in this office and has been found to conform to law.

Accordingly, the undersigned, as Secretary of State, and by the virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing the acceptance and filing of the merger on the date shown below.

Dated: 03/28/2018

Effective: 03/28/2018



R

Rolando B. Pablos Secretary of State

Form 622 (Revised 12/15)

Return in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

FAX: 512 463-5709

Party 1

Form 622

Filing Fee: see instructions



Certificate of Merger Combination Merger Business Organizations Code

This space reserved for office use.

FILED
In the Office of the Secretary of State of Texas
MAR 2 8 2018

Corporations Section

Parties to the Merger

Pursuant to chapter 10 of the Texas Business Organizations Code, and the title applicable to each domestic filing entity identified below, the undersigned parties submit this certificate of merger.

The name, organizational form, state of incorporation or organization, and file number, if any, issued by the secretary of state for each organization that is a party to the merger are as follows:

Oxford Instruments Am	erica, Inc.		
Name of Organization			
The organization is a	for-profit corporation	It is organized und	der the laws of
1110 018m112m11211 12 11	Specify organizational form (e.g., for-profit cor		,
MA USA	• • •	nber, if any, is	
State Country		Texas Secretary of	State file number
	siness is 300 Baker Ave., Suite		MA
its principal place of ou	Address	City	State
✓ The organization w	ill survive the merger. Th	ne organization will not surviv	ve the merger.
The plan of merger	amends the name of the organiza	tion. The new name is set for	th below
The plan of merger	amends the name of the organiza	tion. The new hame is set to	till bolow.
			•
	Name as Amendo	ed .	
Party 2			
1 411.9 2			
Omniprobe, Inc.			
Name of Organization			
The organization is a	for-profit corporation	It is organized un	der the laws of
	Specify organizational form (e.g., for-profit cor		
TX USA	The file nur	nber, if any, is <u>0155733700</u>	****
State Country			State file number
Its principal place of bu	isiness is 300 Baker Ave, Suite 1	50 Concord	, MA
· ·	Address	City	State
The organization w	rill survive the merger.	ne organization will not survi	ve the merger.
The plan of merger	amends the name of the organiza	tion. The new name is set for	rth below.
	Name as Amend	ed .	
Party 3			
, ,			
		·	
Name of Organization			
-			
The organization is a		It is organized un	der the laws of
-	Specify organizational form (e.g., for-profit con		der the laws of

1

The file number, if any, is
State Country Its principal place of business is Texas Secretary of State file number
Address City State The organization will survive the merger. The organization will not survive the merger.
The plan of merger amends the name of the organization. The new name is set forth below.
News or Amended
Name as Amended
Plan of Merger
The plan of merger is attached. If the plan of merger is not attached, the following statements must be completed.
Alternative Statements
Instead of providing the plan of merger, each domestic filing entity certifies that:
1. A plan of merger is on file at the principal place of business of each surviving, acquiring, or new domestic entity or non-code organization that is named in this form as a party to the merger or an organization created by the merger.
2. On written request, a copy of the plan of merger will be furnished without cost by each surviving, acquiring, or new domestic entity or non-code organization to any owner or member of any domestic entity that is a party to or created by the plan of merger and, if the certificate of merger identifies multiple surviving domestic entities or non-code organizations, to any creditor or oblige of the parties to the merger at the time of the merger if a liability or obligation is then outstanding.
Item 3A is the default selection. If the merger effected an amendment to, a restatement of, or an amendment and restatement of the certificate of formation of a surviving filing entity, you must select and complete one of the options shown below. Options 3B and 3C require the submission of the described attachment.
3A. No amendments to the certificate of formation of any surviving filing entity that is a party to the merger are effected by the merger.
3B. No amendments to the certificate of formation of any filing entity are being effected by the merger or by the restated certificate of formation of the surviving filing entity named in the attached restated certificate of formation.
3C. The plan of merger effected an amendment and restatement of the certificate of formation of a surviving filing entity. The amendments being made and the name of the surviving entity restating its certificate of formation are set forth in the attached restated certificate of formation containing amendments.
3D. The plan of merger effected amendments or changes to the following surviving filing entity's certificate of formation.
Name of Gline antity offseting awardways
Name of filing entity effecting amendments The changes or amendments to the filing entity's certificate of formation, other than the name change noted previously, are stated below.

Amendment Text Area		
·		
	,	
		:
4. Organizations Created by Merger The name, jurisdiction of organization, principal each entity or other organization to be created purscertificate of formation of each new domestic formation of merger.	suant to the plan of merger	are set forth below. The
Name of New Organization 1	Jurisdiction	Entity Type (See instructions)
Principal Place of Business Address	City	State Zip Code
Name of New Organization 2	Jurisdiction	Entity Type (See instructions)
Principal Place of Business Address	City	State Zip Code
Name of New Organization 3	Jurisdiction	Entity Type (See instructions)
Principal Place of Business Address	City	State Zip
Approval of th	e Plan of Merger	,
The plan of merger has been approved as required organization that is a party to the merger and by the	•	
The approval of the owners or members of		
was not required by the provisions of the BOC.	Name of dome	stic entity
Effectiveness of Fili	ng (Select either A, B, or C.)	
A. This document becomes effective when the state.	document is accepted and	filed by the secretary of
<u></u>	B. This document becomes effective at a later date, which is not more than ninety (90) days from	
the date of signing. The delayed effective date is:	• · · · · · · · · · · · · · · · · · · ·	
C. This document takes effect on the occurrence	ce of the future event or fac	t, other than the
passage of time. The 90 th day after the date of sign		
The following event or fact will cause the docume		ner described below:

3.

Form 622

Text Area			
	Tax Certificate		
	Attached hereto is a certificate from the comptroller of public accounts that all taxes under title 2, Tax Code, have been paid by the non-surviving filing entity.		
Ø	Instead of providing the tax certificate, one or more of the surviving, acquiring or newly created organizations will be liable for the payment of the required franchise taxes.		
	Execution		
mate here Busi	undersigned signs this document subject to the penalties imposed by law for the submission of a crially false or fraudulent instrument. The undersigned certifies that the statements contained in are true and correct, and that the person signing is authorized under the provisions of the iness Organizations Code, or other law applicable to and governing the merging entity, to execute filing instrument.		
Date			
	Oxford Instruments America, Inc. Merging Entity Name		
	Signature of authorized person (see instructions)		
	Christopher S. Fraser, President		
	Printed or typed name of authorized person		
	Omniprobe, Inc.		
	Merging Entity Name		
	Signature of authorized person (see instructions)		
	Christopher S. Fraser, Treasurer		
	Printed or typed name of authorized person		
	Merging Bntity Name		
	Signature of authorized person (see instructions)		
	Printed or typed name of authorized person .		

Form 622

RECORDED: 04/15/2021