

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM720923

SUBMISSION TYPE:	NEW ASSIGNMENT		
NATURE OF CONVEYANCE:	CHANGE OF NAME		
CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
DE NORA WATER TECHNOLOGIES, INC.		06/30/2020	Corporation: PENNSYLVANIA
RECEIVING PARTY DATA			
Name:	DE NORA WATER TECHNOLOGIES, LLC		
Street Address:	3000 Advance Lane		
City:	Colmar		
State/Country:	PENNSYLVANIA		
Postal Code:	18915		
Entity Type:	Limited Liability Company: PENNSYLVANIA		
PROPERTY NUMBERS Total: 5			
Property Type	Number	Word Mark	
Registration Number:	1321743	AQUAWARD	
Registration Number:	1401973	CAPITAL CONTROLS	
Registration Number:	3565354	SNAP T	
Registration Number:	2940701	SORB 33	
Registration Number:	3663099	ULTRADYNAMICS	
CORRESPONDENCE DATA			
Fax Number:	7139750995		
<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:	18328866845		
Email:	umenon@dmiplaw.com		
Correspondent Name:	USHA C MENON		
Address Line 1:	3 Sugar Creek Center Blvd.		
Address Line 2:	Suite 100		
Address Line 4:	Sugar Land, TEXAS 77478		
NAME OF SUBMITTER:	Usha Menon		
SIGNATURE:	/Usha Menon/		
DATE SIGNED:	04/13/2022		
Total Attachments: 6			

OP \$140.00 1321743

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

04/01/2022

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

De Nora Water Technologies LLC

I, Leigh M. Chapman, Acting Secretary of the Commonwealth of Pennsylvania, do hereby certify that the foregoing and annexed is a true and correct copy of

Amendment filed on Jun 24, 2020 Effective Jun 30, 2020 - Pages (5)

which appear of record in this department.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Leigh M. Chapman


Acting Secretary of the Commonwealth

Certification Number: TSC220401100717-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>

TRADEMARK
REEL: 007690 FRAME: 0985

**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<input type="checkbox"/> Return document by mail to: CSC Order#331992-10 LBY Name _____ Address _____ City _____ State _____ Zip Code _____ <input checked="" type="checkbox"/> Return document by email to: <u>cscpa@cscglobal.com</u>	<p style="text-align: center;">Statement of Conversion DSCB:15-355 (7/1/2015)</p>  <p style="text-align: center;">TCO200629LP1371</p>
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Read all instructions pr

Fee: \$70

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 355 (relating to Statement of conversion), the undersigned association, desiring to effect a conversion, hereby states that:

A. For the converting association:

1. The name of the converting association is: De Nora Water Technologies, Inc.

2. The jurisdiction of formation of the converting association is: Pennsylvania

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

- | | | |
|----------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------|
| <input checked="" 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 type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Liability Limited Partnership | <input type="checkbox"/> Other _____ |


4. Date on which the association was created, incorporated, formed or otherwise came into existence:

04/14/1983
(MM/DD/YYYY)

5. If the converting association is a domestic filing association (a Pennsylvania business corporation, nonprofit corporation, limited partnership, limited liability company, professional association or business trust), the statute under which it was first created, incorporated, formed or otherwise came into existence:

Business Corporation Law of 1988
(ex. Business Corporation Law of 1988, Limited Liability Company Law of 1994, etc.)

**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<input type="checkbox"/> Return document by mail to: CSC Order#331992-10 <hr/> Name <hr/> Address <hr/> City State Zip Code <hr/> <input checked="" type="checkbox"/> Return document by email to: <u>cscpa@cscglobal.com</u>	Certificate of Organization Domestic Limited Liability Company DSCB:15-8821 (rev. 2/2017)  8821
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Read all instructions prior to completing. This form may be submitted online at <https://www.corporations.pa.gov/>.

Fee: \$125 I qualify for a veteran/reservist-owned small business fee exemption (see instructions)

In compliance with the requirements of 15 Pa.C.S. § 8821 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company is: De Nora Water Technologies LLC
(designator is required, e.g., "company," "limited" or "limited liability company" or any abbreviation thereof)

2. Complete part (a) or (b) – not both:

(a) The address of this limited liability company’s registered office in this Commonwealth is:
(post office box alone is not acceptable)

<u>3000 Advance Lane</u>	<u>Colmar</u>	<u>PA</u>	<u>18915</u>	<u>Montgomery</u>
<small>Number and Street</small>	<small>City</small>	<small>State</small>	<small>Zip</small>	<small>County</small>

(b) The name of this limited liability company’s commercial registered office provider and county of venue is:

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

3. The name of each organizer is *(all organizers must sign on page 2)*:

Brent Shelley, Secretary and General Counsel

4. Effective date of Certificate of Organization *(check, and if appropriate complete, one of the following)*:

The Certificate of Organization shall be effective upon filing in the Department of State.

The Certificate of Organization shall be effective on: 06/30/2020 at 12:00 am.
Date (MM/DD/YYYY) Hour (if any)

5. Restricted professional companies only.

Check the box if the limited liability company is organized to render a restricted professional service and check the type of restricted professional service(s).

- The company is a restricted professional company organized to render the following restricted professional service(s):
 - Chiropractic
 - Dentistry
 - Law
 - Medicine and surgery
 - Optometry
 - Osteopathic medicine and surgery
 - Podiatric medicine
 - Public accounting
 - Psychology
 - Veterinary medicine

6. Benefit companies only.

Check the box immediately below if the limited liability company is organized as a benefit company:

- This limited liability company shall have the purpose of creating general public benefit.

Optional specific public benefit purpose. Check the box immediately below if the benefit company is organized to have one or more specific public benefits and supply the specific public benefit(s). See instructions for examples of specific public benefit.

- This limited liability company shall have the purpose of creating the enumerated specific public benefit(s):

7. For additional provisions of the certificate, if any, attach 8½ x 11 sheet(s).

IN TESTIMONY WHEREOF, the organizer(s) has (have) executed this Certificate of Organization this

30th day of June, 2020.



Signature

Signature

Signature