

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT		
<b>NATURE OF CONVEYANCE:</b>	CHANGE OF NAME		
<b>CONVEYING PARTY DATA</b>			
<b>Name</b>	<b>Formerly</b>	<b>Execution Date</b>	<b>Entity Type</b>
OTV SA		07/21/2010	COMPANY: FRANCE
<b>RECEIVING PARTY DATA</b>			
<b>Name:</b>	Veolia Water Solutions & Technologies Support		
<b>Street Address:</b>	Immeuble L' Aquarene		
<b>Internal Address:</b>	1 Place Montgolfier		
<b>City:</b>	Saint Mourice		
<b>State/Country:</b>	FRANCE		
<b>Postal Code:</b>	94410		
<b>Entity Type:</b>	SASU: FRANCE		
<b>PROPERTY NUMBERS Total: 1</b>			
<b>Property Type</b>	<b>Number</b>	<b>Word Mark</b>	
<b>Registration Number:</b>	3639962	BIOFILM CHIP	
<b>CORRESPONDENCE DATA</b>			
<b>Fax Number:</b>	(919)854-2084		
<b>Phone:</b>	919-854-1844		
<b>Email:</b>	jsleeper@coatsandbennett.com		
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent via US Mail.</i>			
<b>Correspondent Name:</b>	Larry L. Coats		
<b>Address Line 1:</b>	1400 Crescent Green		
<b>Address Line 2:</b>	Suite 300		
<b>Address Line 4:</b>	Cary, NORTH CAROLINA 27518		
<b>ATTORNEY DOCKET NUMBER:</b>	6060-010		
<b>DOMESTIC REPRESENTATIVE</b>			
<b>Name:</b>			

OP \$40.00 3639962

**900202070**

**TRADEMARK  
 REEL: 004622 FRAME: 0509**

Address Line 1:  
Address Line 2:  
Address Line 3:  
Address Line 4:

NAME OF SUBMITTER:	Larry L. Coats
Signature:	/LLC/
Date:	09/14/2011

Total Attachments: 6  
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DECLARATION OF MODIFICATION

EXTRACTS FROM THE MINUTES OF THE REGISTRY OF THE CRETEIL TRADE COURT

MZ

No. 11682'01

LEGAL ENTITY

00B3399

110,60 / 11,80

- Denomination, legal form, capital
- Declaration relating to an establishment: (opening, modification, transfer, offering for management leasing, closure)
- Resuming activities
- Transfer of head office
- Dissolution
- Taking on activities of a company founded without any activity
- Complete stoppage of activity without disappearance of the legal entity
- Other

GIE - GEIE

FILL IN IN ANY CASE all of the boxes Nos. 1, 2, 17, 18 AND THE NEW OR AMENDED MENTIONS by indicating the date of the event

REMINDER OF THE IDENTIFICATION PRIOR TO MODIFICATION

**2** SOLE IDENTIFICATION No. 433 962 586  
 REGISTRATION ON THE TCR OF THE RECORD OFFICE OF CRETEIL  
 ON THE CRAFTS REGISTER IN THE DEPARTMENT OF \_\_\_\_\_  
 Record Office(s) of the secondary registration(s) \_\_\_\_\_

Denomination / Sign OTV SA  
 Legal Form SA (a form of joint stock company)  
 Head office or 1st Establishment in France for foreign companies: \_\_\_\_\_  
 Building, no., Immeuble L'Aquarène - 1 Place Montgolfier  
 Postal Code 94410 District SAINT MAURICE

Designation of the tax center where the last VAT and income declarations were filed

DECLARATION RELATIVE TO THE MODIFICATION OF THE LEGAL ENTITY

**5** 06.30.2010 DENOMINATION Veolia Water Solutions & Technologies Support Sign VWSTS  
 Legal Form SASU  
 Company reduced to a sole partner  
 Duration of the legal entity \_\_\_\_\_  
 Closure date of business year \_\_\_\_\_  
 Trade name \_\_\_\_\_

Capital amount, monetary unit € 60.000,300  
 If variable capital: minimum amount \_\_\_\_\_  
 Continuation of the company although the net assets are smaller than half of the company capital  
 Reconstitution of the proper capitals \_\_\_\_\_

**6** 06.30.2010  Merger  Partial transfer of assets This operation results in  an increase of capital  
 Legal entities having participated in the operation: CRETEIL 509 629 580 COMPAGNIE LOCALE  
D'INVESTISSEMENT ET DE GESTION 13 which has become OTV SA SASU which becomes SA Immeuble  
L'Aquarène - 1 Place Montgolfier 94410 SAINT MAURICE

Indicate the liquidator in box 15. In the event of a closure of establishment, fill in box 9  
 Name of the Official Gazette \_\_\_\_\_ Publishing date \_\_\_\_\_  
 Liquidation address:  head office  address of the liquidator  other: \_\_\_\_\_

Continuation on Interpolate Sheet 1A

DECLARATION RELATIVE TO AN ESTABLISHMENT

**7** This application concerns  AN OPENING  A MODIFICATION  A TRANSFER  AN OFFERING FOR MANAGEMENT LEASING  A CLOSURE

Date \_\_\_\_\_

FORMER: ESTABLISHMENT:  Head office  Main establishment  
 Head office - Main establishment  Secondary establishment  First establishment in France of a foreign company

Address: Building, no., \_\_\_\_\_  
 Postal Code \_\_\_\_\_ District \_\_\_\_\_

**8** TRANSFERRED OR CLOSED ESTABLISHMENT

IN CASE OF A TRANSFER: Purpose  Closed  Sold  Other  Head office  Main establishment  
 If an activity is maintained, therefore, the establishment is a:  Head office  Secondary establishment

IN CASE OF A CLOSURE: Purpose  Deleted  Sold  Other  Head office  Main establishment  
 If an employee is no longer employed, date \_\_\_\_\_

MODIFIED OR FOUNDED ESTABLISHMENT

**9** 06.30.2010 Address: Building, no., Immeuble L'Aquarène - 1 Place Montgolfier  
 Postal Code 94410 District SAINT MAURICE  
 Domiciliation contract: Name of paying agent \_\_\_\_\_  
 Sole identification No. \_\_\_\_\_

IN CASE OF A MODIFIED ESTABLISHMENT: Presence of salaried staff  Yes  No  
 becomes  Main establishment and head office  Secondary establishment

IN CASE OF A FOUNDED ESTABLISHMENT:  Head office  Head office - Main establishment  
 Main establishment  Secondary establishment, in this case it is a secondary establishment  
 managed by someone who is empowered to link legal reports with third parties  Yes  No

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**10.06.30.2010 ACTIVITY:**  sedentary  non sedentary /  traveling  
 Activity(ies) exercised *Taking and holding of direct or indirect participations in any firms, in particular companies or groupings (continuation Observations)*

Among such activities, indicate the most important one  
 For such activity, specify the nature thereof by checking only one box:  
 Its nature:  Retail trade  Transportation  Service provision  Import-export  
 Wholesale trade or trade intermediate  Manufacture, production  The professions  
 Rent. of furnished flats  Assembly, installation  Repair  Other  
 building construction, public works  Extraction  Other  
 Its place of exercise:  Shop (surface: m<sup>2</sup>)  Office, firm  On markets  
 To customers  Factory  Workshop  Warehouse  
 On work sites  Mine, quarry  Other

The main activity of this establishment becomes the main activity of the company  Yes  No  
 In case of modification of the activity, it results from the:  
 addition of an activity  partial deletion of an activity, by:  Disappearance  Sale  Taking over by the owner  Other  
 Sign: \_\_\_\_\_

**11 ORIGIN FOR A BUSINESS:**  
 Foundation, go directly to the following box  
 Purchase  Taking in management leasing  Other  
 Previous owner: Sole identification No. \_\_\_\_\_  
 Birth name / Denomination \_\_\_\_\_ First names \_\_\_\_\_  
 Name in use \_\_\_\_\_  
 Purchase, contribution: Official Gazette, publishing date \_\_\_\_\_  
 Name of Gazette: \_\_\_\_\_  
 Management-leasing: contract dated as of \_\_\_\_\_ to \_\_\_\_\_  
 Renewal by tacit renewal  yes  no  
 Lessor of the business: if different from the previous owner  
 Birth name / Denomination \_\_\_\_\_ Name in use \_\_\_\_\_ First names \_\_\_\_\_  
 Domicile / Head Office \_\_\_\_\_ District \_\_\_\_\_  
 Postal Code \_\_\_\_\_

**12 SALARIED STAFF OF THE ESTABLISHMENT** founded: \_\_\_\_\_ hiring date of the first salaried employee \_\_\_\_\_  
 Total amount of salaried staff of the company 215 of which \_\_\_\_\_ apprentices \_\_\_\_\_ multiproduct representatives \_\_\_\_\_

**Date** \_\_\_\_\_  
**13 OFFERING FOR MANAGEMENT-LEASING**  The whole business  A part of the business, which \_\_\_\_\_  
 Address: Building, no. \_\_\_\_\_ Postal Code \_\_\_\_\_ District \_\_\_\_\_  
 Main establishment  Secondary establishment Management-leasing: full name/denomination: \_\_\_\_\_

**BUSINESS GIVEN IN MANAGEMENT-LEASING**  
 Salaried staff present within the establishment:  Yes  No

**14 THE NATURE OF THE MANAGEMENT IS MODIFIED**  Yes  No If yes, it becomes:  
 EGALITARIAN/MINORITY MANAGEMENT  a company is associated thereto  
 MAJORITY MANAGEMENT, if the spouse is associated thereto, he/she participates in the activity without being paid  Yes  No

**15 IN CASE OF DECLARATION OF MODIFICATION 06.30.2010**  New  Departing *fill in 15a*  
 Modification of personal situation  Maintained former capacity  
 CAPACITY **PRESIDENT AND CHIEF EXECUTIVE OFFICER & DIRECTOR**  
 For business companies, can the interested party commit the company on his own  Yes  No  
 Birth name / Denomination \_\_\_\_\_  
 Name in use \_\_\_\_\_ First names \_\_\_\_\_  
 Born on \_\_\_\_\_ in \_\_\_\_\_ Nationality \_\_\_\_\_  
 Domicile, legal form \_\_\_\_\_  
 Domicile / Head Office \_\_\_\_\_  
 Postal Code \_\_\_\_\_ District \_\_\_\_\_  
 When a legal entity, Recordal place and No. \_\_\_\_\_

**14a** In case of a departing or modified majority manager: Social Security No. \_\_\_\_\_ Department \_\_\_\_\_  
 State health department office INS \_\_\_\_\_ Pension fund \_\_\_\_\_

**15a**  **DEPARTING** Birth name, name in use, first names / Denomination and legal form  
**BINET-TARBE DE VAUXCLAIRS Jean-Hardouin**

**16 OBSERVATIONS:** continuation from activity: carrying out financial, real estate, industrial, civil or commercial operations.  
 desired APE code: 7010Z.  
 Correspondence address  Declared in box No. 2  Other \_\_\_\_\_ District \_\_\_\_\_  
 Postal Code \_\_\_\_\_

THE LEGAL REPRESENTATIVE full name/denomination and address  
 THE ATTORNEY QUOTIDIEN JURIDIQUE - 12 RUE DE LA CHAUSSEE D'ANTIN -  
 ANOTHER PERSON 75009 PARIS/PPO (vpotier@le-quotidien-juridique.com)  
 Number of interpolate sheets 2 INS 0  
 (308461/001/Client account: ACCOUNT 20)

**17** Telephone(s) \_\_\_\_\_  
 Fax / e-mail \_\_\_\_\_  
 SIGNATURE \_\_\_\_\_  
 [signed illegible]

Sign each sheet separately

Recordal entered on the  
Trade and Companies Register  
Of CRETEIL 9401

On **JULY 28, 2010**

Under number: *16747*

The Registrar

FOR CERTIFIED TRUE COPY  
The Registrar  
*[signed illegible]*

694516866052 le 22 JUNI 2010

M2

# DECLARATION DE MODIFICATION

## PERSONNE MORALE 008.3399

RESERVATION  
Déclaration  
reçue  
EXTRAIT DES MINUTES DU GREFFE  
DU TRIBUNAL DE COMMERCE DE CRETEIL

- Dénomination, forme juridique, capital
- Déclaration relative à un établissement : (ouverture, modification, transfert, mise en location gérance, fermeture)
- Reprise d'activité
- Transfert du siège
- Cessation totale d'activité sans disparition de la personne morale
- Autre
- Fusion
- Dissolution

- Prise d'activité d'une société créée sans activité
- Cessation totale d'activité sans disparition de la personne morale
- Autre

### REPLIR DANS TOUS LES CAS les cadres n° 1, 2, 17, 18 ET LES MENTIONS NOUVELLES OU MODIFIEES en indiquant la date de l'évènement.

#### RAPPEL D'IDENTIFICATION AVANT MODIFICATION

N° UNIQUE D'IDENTIFICATION [4.3.3.9.6.2.5.8.6]  
 IMMATRICULATION AU RCS DU GREFFE DE CRETEIL  
 AU RM DANS LE DEPT. DE \_\_\_\_\_  
 Greffe(s) du ou des immatriculation(s) secondaire(s) \_\_\_\_\_

Dénomination / Sigle OTV SA  
 Forme Juridique SA  
 Siège ou 1er établissement en France pour les sociétés étrangères :  
 rés., bat., n° voie, lieu dit Immeuble 1'Aguarène - 1 Place Montgolfier  
 Code Postal [9.4.4.1.0] Commune SAINT MAURICE

#### Désignation du centre des impôts où ont été déposées les dernières déclarations de résultats et de TVA

Date \_\_\_\_\_  
 Dénomination Veolia Water Solutions & Technologies  
 Support \_\_\_\_\_ Sigle VNSTS  
 Forme juridique SASU  
 Société réduite à un associé unique  
 Durée de la personne morale [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 Date de clôture de l'exercice social [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 Nom commercial \_\_\_\_\_

Personnes morales ayant participé à l'opération :  Fusion  Acte de cette opération entraîne  une augmentation de capital  
LOCALE D'INVESTISSEMENT ET DE GESTION 13 devenue OTV SA SASU  
 qui devient SA Immeuble 1'Aguarène - 1 Place Montgolfier  
94410 SAINT MAURICE  
 \_\_\_\_\_ Suite sur intercalaire M'

Capital : montant, unité monétaire 60.000.300 €  
 Si capital variable : Montant minimum \_\_\_\_\_  
 Continuation de la société malgré un actif net inférieur à la moitié du capital social  
 Reconstitution des capitaux propres \_\_\_\_\_

Dissolution.  
 Indiquer le liquidateur au cadre 15. Dans le cas de fermeture d'établissements, remplir cadre 8  
 Nom du journal d'annonces légales \_\_\_\_\_ Date de parution [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 Adresse de liquidation :  siège  adresse du liquidateur  autre : \_\_\_\_\_

#### DECLARATION RELATIVE A UN ETABLISSEMENT

Cette demande concerne  UNE OUVERTURE  UNE MODIFICATION  UN TRANSFERT  UNE MISE EN LOCATION GERANCE  UNE FERMETURE  
 Date \_\_\_\_\_ ETABLISSEMENT TRANSFERE OU FERME  
 ANCIEN ETABLISSEMENT :  Siège  Etablissement principal  
 Siège-Etablissement principal  Etablissement secondaire  Premier établissement en France d'une société étrangère  
 Adresse : rés., bat., n° voie, lieu dit (Si différente de celle du cadre 2) \_\_\_\_\_  
 Code postal [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Commune \_\_\_\_\_

POUR UN TRANSFERT : Destination  Fermé  Vendu  Autre \_\_\_\_\_  
 Si maintien d'une activité, de ce fait, l'établissement est :  Siège  Principal  Secondaire  
 POUR UNE FERMETURE : Destination  Supprimé  Vendu  Autre \_\_\_\_\_  
 Si cessation d'emploi de tout salarié : date [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Suite sur intercalaire M'

Date \_\_\_\_\_ ETABLISSEMENT CREE OU MODIFIE  
 Adresse : rés., bat., app., étage, n° voie, lieu dit Immeuble 1'Aguarène - 1  
Place Montgolfier  
 Code postal [9.4.4.1.0] Commune SAINT MAURICE  
 Contrat de domiciliation : Nom du domiciliaire \_\_\_\_\_  
 N° unique d'identification [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

POUR UN ETABLISSEMENT MODIFIE : Présence de salariés  oui  non  
 Il devient  Principal  Secondaire (seulement si changement de nature).  
 POUR UN ETABLISSEMENT CREE :  Siège  Siège - Etablissement principal  
 Etablissement principal  Etablissement secondaire, dans ce cas, est-il permanent  
 et dirigé par une personne ayant le pouvoir de lier des rapports juridiques avec les tiers  oui  non

Eile leur garantit un droit d'accès et de rectification pour les données les concernant auprès des organismes destinataires de ce formulaire.

TRADEMARK

REEL: 004622 FRAME: 0514




Inscription portée au  
Registre du Commerce et des Sociétés  
de CRÉTEIL 9401

le 28 JUIL. 2010

Sous le numéro: 16747

Le Greffier

  
POUR COPIE DÉPOSÉE  
Le Greffier