

TRADEMARK ASSIGNMENT COVER SHEET

Electronic Version v1.1
Stylesheet Version v1.2

ETAS ID: TM722498

| | | | |
|---|---|-----------------------|---------------------------|
| SUBMISSION TYPE: | NEW ASSIGNMENT | | |
| NATURE OF CONVEYANCE: | ENTITY CONVERSION | | |
| CONVEYING PARTY DATA | | | |
| Name | Formerly | Execution Date | Entity Type |
| Lite Tech, Inc. | | 04/19/2022 | Corporation: PENNSYLVANIA |
| RECEIVING PARTY DATA | | | |
| Name: | Lite Tech, LLC | | |
| Street Address: | 975 Madison Ave. | | |
| City: | Norristown | | |
| State/Country: | PENNSYLVANIA | | |
| Postal Code: | 19403 | | |
| Entity Type: | Limited Liability Company: PENNSYLVANIA | | |
| PROPERTY NUMBERS Total: 1 | | | |
| Property Type | Number | Word Mark | |
| Registration Number: | 2758773 | XENOLITE | |
| CORRESPONDENCE DATA | | | |
| Fax Number: | | | |
| <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: | 13177133500 | | |
| Email: | TMTaftdocket@Taftlaw.com | | |
| Correspondent Name: | Zach Gordon | | |
| Address Line 1: | One Indiana Square, Ste 3500 | | |
| Address Line 4: | INDIANAPOLIS, INDIANA 46204 | | |
| NAME OF SUBMITTER: | Zach Gordon | | |
| SIGNATURE: | /Zach Gordon/ | | |
| DATE SIGNED: | 04/20/2022 | | |
| Total Attachments: 6 | | | |
| source=LITE TECH LLC - PA - Department of State - Same Day Corporate Filing#page1.tif | | | |
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CH \$40.00 2758773

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS
401 NORTH STREET, ROOM 206
P.O.BOX 8722
HARRISBURG, PA 17105-8722
WWW.CORPORATIONS.PA.GOV

PENNCORP SERVICEGROUP INC
Counter Pickup
HARRISBURG PA 17101


LITE TECH, LLC

The Bureau of Corporations and Charitable Organizations is happy to send your filed document. The Bureau is here to serve you and we would like to thank you for doing business in Pennsylvania.

If you have any questions pertaining to the Bureau, please visit our website at www.dos.pa.gov/BusinessCharities Or you may contact us by telephone at (717)787-1057. Information regarding business and UCC filings can be found on our searchable database at www.corporations.pa.gov/Search/CorpSearch .

Entity number : 2057679

PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

| | |
|--|---|
| Return document by mail to: <u>1182242</u> | Statement of Conversion DSCB:15-355 1/1/2015 |
| Name <u>PENNCORP SERVICEGROUP</u> <u>COUNTER PICK-UP</u> |  TCO220419MC1175 |
| Address <u>penncorp@penncorp.net</u> | |
| City _____ State _____ Zip Code _____ | |
| <input checked="" type="checkbox"/> Return document by email to: _____ | |

Read all instructions pri

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: Lite Tech, 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:

10/28/1991

(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.)

PA DEPT OF STATE

APR 19 2022

6. Check and complete one of the following addresses for the converting association.

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <p>If the converting 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. Complete part (a) OR (b) – not both:</p> <p>(a) <u>189 W Lancaster Avenue</u> <u>Paoli</u> <u>Pennsylvania</u> <u>19301</u> <u>Chester</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> |
| | <p>If the converting association is a domestic association that is not 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> |
| | <p>If the converting 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:</p> <p>_____ <small>Number and street City State Zip</small></p> |

B. For the converted association:

1. The name of the converted association is: Lite Tech, LLC

2. The jurisdiction of formation of the converted association is: 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 for the converted association.

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <p>If the converted association is a domestic filing association, domestic limited liability partnership or registered foreign association, its registered office address. Complete part (a) OR (b) – not both:</p> <p>(a) <u>975 Madison Ave</u> <u>Norristown</u> <u>Pennsylvania</u> <u>19403</u> <u>Montgomery</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> |
| | <p>If the converted association is a domestic association that is not 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> |
| | <p>If the converted association is a nonregistered foreign association, complete both (1) and (2).</p> <p>(1) 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> <p>(2) The name and address, including street and number, of its registered agent:</p> <p>_____ <small>Name of Registered Agent</small></p> <p>_____ <small>Number and street City State Zip</small></p> |

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

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

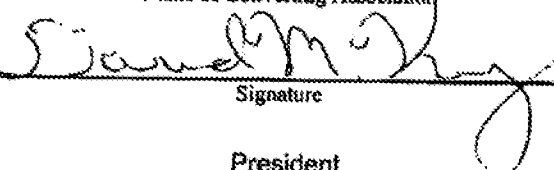
D. Approval of conversion by converting association (check only one):

- For converting association that is a domestic entity – The plan of conversion was approved in accordance with 15 Pa.C.S. Chapter 3, Subchapter E (relating to conversion).
- For converting association that is a foreign association – The conversion was approved in accordance with the law of the jurisdiction of formation of the converting association.

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

IN TESTIMONY WHEREOF, the undersigned converting association has caused this Statement of Conversion to be signed by a duly authorized officer thereof this 19 day of April, 2022

 Lite Tech, Inc.
 Name of Converting Association


 Signature

 President
 Title

PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

| | |
|--|---|
| <input type="checkbox"/> Return document by mail to: Name: <u>PENNCORP SERVICEGROUP</u> Address: <u>COUNTER PICK-UP</u> <u>penncorp@penncorp.net</u> City: _____ State: _____ Zip Code: _____ <input type="checkbox"/> Return document by email to: _____ | Certificate of Organization Domestic Limited Liability Company DSCB:15-8821 (rev. 2/2017) |
|--|---|

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: Lite Tech, 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)

975 Madison Ave, Norristown, PA 19403 Montgomery

Number and Street _____ City _____ State _____ Zip _____ County _____

(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)*:

David M. Krug

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: _____ at _____
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 8 1/2 x 11 sheet(s).

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


19 day of April, 2022.



 Signature



 Signature



 Signature

TRADEMARK

REEL: 007696 FRAME: 0897