AMENDED ANNUAL REPORT

Corporation Division
sos.oregon.gov/business

E-FILED
Oct 05, 2024
OREGON SECRETARY OF STATE

REGISTRY NUMBER

4812798

REGISTRATION DATE

11/07/2001

BUSINESS NAME

MCKENNON LLC

BUSINESS ACTIVITY

CARRYOUT PIZZA

MAILING ADDRESS

PO BOX 1767
JACKSONVILLE OR 97530 USA

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

PRIMARY PLACE OF BUSINESS

1087 MEDFORD CENTER
MEDFORD OR 97504 USA

JURISDICTION

OREGON

REGISTERED AGENT

BRIAN M MCKENNON

1087 MEDFORD CENTER
MEDFORD OR 97504 USA

If the Registered Agent has changed, the new agent has consented to the appointment.

MEMBER

BRIAN M MCKENNON

1087 MEDFORD CENTER
MEDFORD OR 97504 USA

I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, managers, members or agents of the limited liability company on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

ELECTRONIC SIGNATURE

NAME

BRIAN M MCKENNON

TITLE

MEMBER

DATE

10-05-2024