AMENDED ANNUAL REPORT

Corporation Division
sos.oregon.gov/business

E-FILED
Oct 28, 2024
OREGON SECRETARY OF STATE

REGISTRY NUMBER

218363596

REGISTRATION DATE

10/13/2023

BUSINESS NAME

CASCADE TRANSIT LLC

BUSINESS ACTIVITY

NON-EMERGENCY MEDICAL TRANSPORT

MAILING ADDRESS

2355 STATE ST
STE 101
SALEM OR 97301 USA

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

PRIMARY PLACE OF BUSINESS

2355 STATE ST
STE 101
SALEM OR 97301 USA

JURISDICTION

OREGON

REGISTERED AGENT

75788399 - REGISTERED AGENTS INC

2355 STATE ST
STE 101
SALEM OR 97301 USA

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

MEMBER

IVAN VELASQUEZ

2355 STATE ST STE 101
SALEM OR 97301 USA

MEMBER

TY LOUIS VELASQUEZ

2355 STATE ST STE 101
SALEM OR 97301 USA

MEMBER

DHARREL RIVERA

2355 STATE ST STE 101
SALEM OR 97301 USA

MEMBER

EDUARDO SANTILLAN

2355 STATE ST STE 101
SALEM OR 97301 USA

MEMBER

DHASTIN RIVERA

2355 STATE ST STE 101
SALEM OR 97301 USA

MEMBER

JOEL RIVERA

2355 STATE ST STE 101
SALEM OR 97301 USA

MEMBER

MARTHA CASTILLO

2355 STATE ST STE 101
SALEM OR 97301 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

ROBIN JONES

TITLE

PREPARER

DATE

10-25-2024