08/18/2008 4:36PM 000001#8039 0001
BUSINESS REG $50.00

Phone: (503) 986-2200
Fax: (503) 378-4381

Articles of Incorporation—Business/Professional

Secretary of State
Corporation Division
255 Capitol St. NE, Suite 151
Salem, OR 97310-1327
FilingInOregon.com

Check the appropriate box below:

☑ BUSINESS CORPORATION
(Complete only 1, 2, 3, 4, 5, 6, 8, 9, 10)

☐ PROFESSIONAL CORPORATION
(Complete all items)

FILED
AUG 18 2008
OREGON
SECRETARY OF STATE

REGISTRY NUMBER: 541499-93
For office use only

In accordance with Oregon Revised Statute 192.410-192.490, **all information on this form is publicly available, including addresses.** We must release this information to all parties upon request and it will be posted on our website. For office use only

Please Type or Print Legibly in **Black** Ink. Attach Additional Sheet if Necessary.

1) **NAME OF CORPORATION:** Blacker Publishing, Inc.

NOTE: For a BUSINESS CORPORATION, the name must contain the word "Corporation," "Company," "Incorporated," or "Limited," or an abbreviation of one of such words. For a PROFESSIONAL CORPORATION, the name must contain the words "Professional Corporation," or abbreviations thereof, i.e., "P.C." or "Prof. Corp."

2) **NAME OF THE PERSON WHO WILL ACCEPT LEGAL SERVICE FOR THIS BUSINESS (REGISTERED AGENT)**
F. de la Puente, Esq

3) **REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS** (Must be an **Oregon Street Address**, which is identical to the registered agent's business office. Must include city, state, zip; **No PO Boxes.**)
1610 12th Street S.E.
Salem, OR 97302

4) **ADDRESS WHERE THE DIVISION MAY MAIL NOTICES**
3377 Walnut Pl. NW
Salem, OR 97304

5) **OPTIONAL PROVISIONS** (Attach a separate sheet.)

6) **NUMBER OF SHARES** (At least one share must be listed.)
10,000

Professional Corporation Only

7) **IF RENDERING A LICENSED PROFESSIONAL SERVICE OR SERVICES, DESCRIBE THE SERVICE(S) BEING RENDERED.**

8) **WHO IS FORMING THIS BUSINESS? (INCORPORATORS)** (List names and addresses of each incorporator.) (Attach a separate sheet if necessary.)
Ronda L. Blacker, CPA (Inactive), 1610 12th Street SE, Salem, OR 97302
F. de la Puente, Esq., 1610 12th Street SE, Salem, OR 97302

9) **EXECUTION/SIGNATURE(S)** (All Incorporators must sign.) (Attach a separate sheet if necessary.)
By my signature, I declare as an authorized authority, that 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.

Signature	Printed Name
Ronda L. Blacker 8-17-08	Ronda L. Blacker
F. de la Puente 8-17-08	F. de la Puente

FEES

Required Processing Fee $ 50
Confirmation Copy (Optional) $5

Processing Fees are nonrefundable

Please make check payable to "Corporation Division."

NOTE:
Fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.

10) **CONTACT NAME** (To resolve questions with this filing.)
Ronda L.Blacker

DAYTIME PHONE NUMBER (Include area code.)
(503) 373-3566

111 (Rev. 8/07)