Assumed Business Name – Amendment

Phone: (503) 986-2200
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Secretary of State
Corporation Division
255 Capitol St. NE, Suite 151
Salem, OR 97310-1327
FilingInOregon.com

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OREGON
SECRETARY OF STATE

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REGISTRY NUMBER: 006833-91

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

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

To change business name use new registration, Form 101.

1) **ASSUMED BUSINESS NAME:** Gateway Financial Services

2) **DESCRIPTION OF BUSINESS**
Provide financial services

3) **PRINCIPAL PLACE OF BUSINESS** (Street address, city, state, zip)
9400 SW Barnes Rd., Ste. 100
Portland OR 97221

4) **NAME OF AUTHORIZED REPRESENTATIVE** (One name only)
CONTINUING ☑ NEW ☐
David E. Grein

5) **MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE**
1030 SW Morrison
Portland OR 97205

6) **REGISTRANTS** (List name and publicly available **street** address of each person or entity who will conduct or transact business under the assumed business name.) (All new registrants must be listed. If registrants are withdrawing, both continuing and withdrawing registrants must be listed.)

NEW REGISTRANTS (Name, Street Address)

CONTINUING REGISTRANTS (Name, Street Address)
GFS, Inc.
9400 SW Barnes Rd., Ste. 100
Portland OR 97221
Reg no. 470592-87

WITHDRAWING REGISTRANTS

7) **COUNTIES**

☑ **ALL COUNTIES** (Statewide)

☐ Baker	☐ Crook	☐ Harney	☐ Lake	☐ Morrow	☐ Union
☐ Benton	☐ Curry	☐ Hood River	☐ Lane	☐ Multnomah	☐ Wallowa
☐ Clackamas	☐ Deschutes	☐ Jackson	☐ Lincoln	☐ Polk	☐ Wasco
☐ Clatsop	☐ Douglas	☐ Jefferson	☐ Linn	☐ Sherman	☐ Washington
☐ Columbia	☐ Gilliam	☐ Josephine	☐ Malheur	☐ Tillamook	☐ Wheeler
☐ Coos	☐ Grant	☐ Klamath	☐ Marion	☐ Umatilla	☐ Yamhill

8) **SIGNATURES** Any change requires a signature. New registrants must sign. If any registrants are WITHDRAWING, withdrawing Registrants or Authorized Representative must sign. If there is a change of Authorized Representative, all registrants must sign.

David E. Grein, Attorney-in-Fact for Scott Everett, President

FEES
No Processing Fee
Confirmation Copy (Optional) $5

9) **CONTACT NAME** (To resolve questions with this filing.)
Kathryn J. Bell

DAYTIME PHONE NUMBER (Include area code.)
503 222-1812

102 (Rev. 1/06)