Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, C

Complete only the sections that you are upda
To review current information, please go to: sos.

Assumed Business Name - Amendment

FILED: APR 8, 2026
OREGON SECRETARY OF STATE

202557591-29062218

REGISTRY NUMBER: 202557591

THE GREAT ESCAPE **AMDREG**

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.

For office use only

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

1. **CURRENT BUSINESS NAME:** The Great Escape
2. **NEW BUSINESS NAME:** (If changed, $50 fee required) N/A
3. **DESCRIPTION OF BUSINESS:** Escape Rooms, Puzzel Rooms
4. **PRINCIPAL PLACE OF BUSINESS:** (Street Address, City, State, Zip)
   1845 Highway 101 SW, Suite 1, Lincoln City, OR 97367
5. **NAME OF AUTHORIZED REPRESENTATIVE:** (One name only) **CONTINUING** (•) or **NEW** ( )
   Barbara Keckler
6. **MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE:**
   1845 Highway 101 SW, Suite 1, Lincoln City, OR 97367
7. **REGISTRANTS/OWNERS:** (List name and publicly available **street** address of new registrants)(Attach separate sheet if needed)

   a. NEW REGISTRANTS/OWNERS:

Name	Street Address	City	State	Zip
Coleman Risdon	1845 Highway 101 SW	Suite 1,	OR	97367

   b. WITHDRAWING REGISTRANTS/OWNERS:
   N/A
8. **CURRENT REGISTRANTS/OWNERS ADDRESS CHANGE ONLY:** (This section is only for registrant address changes)(Attach separate sheet if needed)

Registrant Name	Street Address	City	State	Zip
N/A				

9. 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

10. **SIGNATURE(S):** New Registrants must sign. If any Registrants are WITHDRAWING, withdrawing Registrants or Authorized Representative must sign. I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. 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:
Barbara Keckler B. Keckler	Barbara Keckler
Coleman Risdon C. Risdon	Coleman Risdon

CONTACT NAME: (To resolve questions with this filing)
Coleman Risdon

PHONE NUMBER: (Include area code)
805-263-9190

FEES

If Changing Business Name **$50**
No Fee For Other Changes
Processing Fees are nonrefundable. Please make check payable to "Corporation Division".
Free copies are available at sos.oregon.gov/business using the Business Name Search program.

Assumed Business Name - Amendment (11/17)

ADD ONE ADDITIONAL OWNER (Coleman Risdon) To The Great Escape.