APPLICATION FOR REGISTRATION

Corporation Division
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E-FILED
Nov 12, 2010
OREGON SECRETARY OF STATE

REGISTRY NUMBER

72566392

TYPE

ASSUMED BUSINESS NAME

ENTITY NAME

WALLACEANDSONS.NET

BUSINESS ACTIVITY

MANAGEMENT CONSULTING SERVICES, OTHER

PRINCIPAL PLACE OF BUSINESS

20060 TORREY PINES DR.
OREGON CITY OR 97045 USA

NAME & ADDRESS OF AUTHORIZED REPRESENTATIVE

MARK CHRISTOPHER WALLACE

20060 TORREY PINES DR.
OREGON CITY OR 97045 USA

REGISTRANT/OWNER

MARK CHRISTOPHER WALLACE

20060 TORREY PINES DR.
OREGON CITY OR 97045 USA

COUNTIES

CLACKAMAS

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.

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

MARK CHRISTOPHER WALLACE