Assumed Business Name - Amendment

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

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REGISTRY NUMBER: 748906-91

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.

1. **CURRENT BUSINESS NAME:** Pause
2. **NEW BUSINESS NAME:** (If changed)
3. **DESCRIPTION OF BUSINESS:** Massage Therapy
4. **PRINCIPAL PLACE OF BUSINESS:** (Street Address, City, State, Zip)
   6635 N Baltimore Ave., Suite 260 Portland, OR 97203
5. **NAME OF AUTHORIZED REPRESENTATIVE:** (One name only) **CONTINUING** (•) or **NEW** ( )
   Colleen Eliza Nasreen
6. **MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE:**
   2011 SW Custer St., Portland, OR 97219
7. **REGISTRANTS/OWNERS:** (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 any registrants are WITHDRAWING; withdrawing, new and/or continuing registrants must be listed.)

	Name	Street Address	City	State	Zip
a. NEW REGISTRANTS/OWNERS:					
b. CONTINUING REGISTRANTS/OWNERS:	Colleen Eliza Nasreen	2011 SW Custer St.	Portland	OR	97219
c. WITHDRAWING REGISTRANTS/OWNERS:					

8. COUNTIES:

☐ ALL COUNTIES (Statewide)	☐ Baker	☐ Crook	☐ Harney	☐ Lake	☐ Morrow
	☐ Benton	☐ Curry	☐ Hood River	☐ Lane	☒ Multnomah
	☐ Clackamas	☐ Deschutes	☐ Jackson	☐ Lincoln	☐ Polk
	☐ Clatsop	☐ Douglas	☐ Jefferson	☐ Linn	☐ Sherman
	☐ Columbia	☐ Gilliam	☐ Josephine	☐ Malheur	☐ Tillamook
	☐ Coos	☐ Grant	☐ Klamath	☐ Marion	☐ Umatilla

☐ Union	
☐ Wallowa	
☐ Wasco	
☐ Washington	
☐ Wheeler	
☐ Yamhill	

9. **SIGNATURE(S):** Any change requires a signature. New registrants must sign.
   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:
Colleen	Colleen Nasreen

PAUSE

74890691-15837033 AMDREG

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 FilingInOregon.com using the Business Name Search program.