Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone:(503)986-2200
www.filinginoregon.com

Assumed Business Name Reactivation
Registry Number: 83689597
Date of Registration: 02/24/2012

RIGADO

Please complete and return this letter and any enclosed documents for filing the requested reinstatement/reactivation.

Submit $100 for the required fees.

The above entity hereby requests to be active on the records of the Corporation Division. The effective date of administrative cancellation is 02/25/2016

The reason(s) for administrative cancellation has been eliminated or did not exist.

By: _____ Date : 06/27/2016
(Authorized Signature)

Any fees submitted with this document are non refundable and will be held for 45 days. If the document is returned for filing within 45 days no additional fees will be due unless otherwise stated in this letter.

Business Registry
Corporation Division
(503) 986-2200

FILED
JUL 08 2016
OREGON
SECRETARY OF STATE

RIGADO

83689597-17151410 REAABN

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RIGADO

The following information is required by statute. Please complete the entire form. If any of the information is incorrect you can make changes on this form.

Principal Place of Business: (Physical Street Address)	442	**Rigado LLC** 3950 Fairview Industrial Dr SE Ste 100 Salem, OR 97302	02	3950 FAIRVIEW INDUSTRIAL DR SE SUITE 100 SALEM, OR 97302
Authorized Representative:	RIG			
Mailing Address:	260		R 97302	

Registrant(s) - Name(s) and Physical Address(es):
RIGADO LLC

Counties:

☐ 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

Business Description: (Primary business activity) ENGINEERING Consulting

Signatures: New registrants must sign. If any Registrants are WITHDRAWING, withdrawing Registrants or Authorized Representative must sign.

By my signature, I declare as an authorizing 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: _____ **Signature:** _____

Contact Name: Chris Corrado **Phone Number:** 971 208 9853

Make check payable to "Corporation Division" and mail completed form with payment to the address above.
Note: Filing fees may be paid with a major credit card.
Submit the card number and expiration date on a separate page for your protection.