Assumed Business Name - New Registration

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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JUL 14 2016
OREGON
SECRETARY OF STATE

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REGISTRY NUMBER: 1233157-98

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. **ASSUMED BUSINESS NAME:** (To be registered) Pour

Registration or filing of a name does not grant exclusive rights or interests in that name. A name may be available for registration; however, someone else may hold a prior right to that name, or the name may be too similar to another, and may result in a case of legal action brought against the registrant for dilution or unfair competition of someone else's business.

2. **DESCRIPTION OF BUSINESS:** (Primary business activity)
wine bar

3. **PRINCIPAL PLACE OF BUSINESS:** (Street Address, City, State, Zip)
2755 NE Broadway
Portland, OR 97232

4. **WHO IS AUTHORIZED TO REPRESENT THE OWNERS:** (Authorized Representative) (One name only)
Robert Charles Volz

5. **MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE:**
647 NE Royal Place
Portland, OR 97232

6. NAMES OF OWNERS (REGISTRANTS) AND PUBLICLY AVAILABLE ADDRESSES: (List name and street address of each person or entity who will conduct or transact business under the assumed business name.) (Attach a separate sheet if necessary.)

Name	Street Address	City	State	Zip
Pour LLC	647 NE Royal Court	Portland	OR	97232

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. **EXECUTION/SIGNATURE(S):** (All owners/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:
Pour LLC
by Robert Volz
Robert Charles Volz - Member

Printed Name:

CONTACT NAME: (To resolve questions with this filing)
Daryl M. Pulley

PHONE NUMBER: (Include area code)
(503) 288-0148

FEES
Required Processing Fee $50
Assumed Business Name filings are good for 2 years
Processing Fees are nonrefundable. Please make check payable to "Corporation Division".
Free copies are

POUR

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