APPLICATION FOR REGISTRATION

Corporation Division
www.filinginoregon.com

E-FILED
Sep 14, 2016
OREGON SECRETARY OF STATE

REGISTRY NUMBER

124962994

TYPE

ASSUMED BUSINESS NAME

ENTITY NAME

L DELIVERIES

BUSINESS ACTIVITY

DELIVERING FURNITURE

PRINCIPAL PLACE OF BUSINESS

1950 2ND ST # M102
SPRINGFIELD OR 97477 USA

NAME & ADDRESS OF AUTHORIZED REPRESENTATIVE

LINDSAY N DEJESUS

1950 2ND ST # M102
SPRINGFIELD OR 97477 USA

REGISTRANT/OWNER

LINDSAY N DEJESUS

1950 2ND ST # M102
SPRINGFIELD OR 97477 USA

COUNTIES

BENTON, LINN, MARION, POLK

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

NAME

LINDSAY N DEJESUS

TITLE

REGISTRANT

DATE SIGNED

09-13-2016