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

Phone: (503)986-2200
Fax: (503)378-4381
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**2018 ANNUAL REPORT**
**Registry Number:** 124062092
**Date of Organization:** 03/11/2016
**Fee:** $100
**Due Date:** 08/11/2018
**Type:** DOMESTIC LIMITED LIABILITY COMPANY

INSPIRED OASIS, LLC
6591 REFLECTION DRIVE #106
SAN DIEGO CA 92124

FILED
AUG 10 2018
OREGON
SECRETARY OF STATE

**Name of Domestic Limited Liability Company**
INSPIRED OASIS, LLC
**Jurisdiction:** OREGON

The following information is required by statute. Please complete the entire form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

**Registered Agent**
PACIFIC REGISTERED AGENTS, INC.
942 WINDEMERE DR NW
SALEM OR 97304

If the Registered Agent has changed, the new agent has consented to the appointment. Oregon street address required.

**1) Type of Business**

**2) Principal Place of Business** (Address,city,state,zip)
942 WINDEMERE DR NW
SALEM OR 97304

**3) Mailing Address** (Address,city,state,zip)
6591 REFLECTION DRIVE #106
SAN DIEGO CA 92124

**4)** ☒ **Member or** ☐ **Manager** (Name&Address)
ROBIN CARROLL
6591 REFLECTION DR #106
SAN DIEGO CA 92124

**5)** ☒ **Member or** ☐ **Manager** (Name&Address)
MICHAEL CARROLL
6591 REFLECTION DR #106
SAN DIEGO CA 92124

**Execution:**
I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any members, managers, employees or agents of the limited liability company on behalf of which the person signs. 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.

**6) Signature** Michael K Carroll

**7) Printed Name** M. Ke Carroll

**8) Date** 31 July 2018

**9) Phone Number** 619-850-1957

**Make check payable to "Corporation Division" and mail 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.

ANRPF1-07/31/18

INSPIRED OASIS, LLC
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