AMENDED ANNUAL REPORT

Corporation Division
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E-FILED
May 16, 2019
OREGON SECRETARY OF STATE

REGISTRY NUMBER

102963394

REGISTRATION DATE

06/24/2014

BUSINESS NAME

SALMON, LLC

BUSINESS ACTIVITY

THE PURPOSE OF THE COMPANY IS TO OWN, MANAGE AND LEASE REAL PROPERTY (THE BUSINESS) AND TO ENGAGE IN ALL ACTIVITIES INCIDENTAL TO THAT BUSINESS.

MAILING ADDRESS

C/O DEMETRI TSOHANTARIDIS PC
201 N MERIDIAN ST STE B
NEWBERG OR 97132 USA

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

PRIMARY PLACE OF BUSINESS

707 E 1ST ST
NEWBERG OR 97132 USA

JURISDICTION

OREGON

REGISTERED AGENT

62968293 - DEMETRI TSOHANTARIDIS PC

C/O DEMETRI TSOHANTARIDIS PC
201 N MERIDIAN ST STE B
NEWBERG OR 97132 USA

If the Registered Agent has changed, the new agent has consented to the appointment.

MEMBER

EDIE SALMON

707 E 1ST ST
NEWBERG OR 97132 USA

MEMBER

STEVE SALMON

707 E 1ST ST
NEWBERG OR 97132 USA

MEMBER

GREG SALMON

707 E 1ST ST
NEWBERG OR 97132 USA

MEMBER

JENA SALMON

707 E 1ST ST
NEWBERG OR 97132 USA

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 officers, managers, members 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.

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

DEMETRI TSOHANTARIDIS

TITLE

REGISTERED AGENT

DATE SIGNED

05-16-2019