APPLICATION FOR REGISTRATION

Corporation Division
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E-FILED
Nov 06, 2020
OREGON SECRETARY OF STATE

REGISTRY NUMBER

174038498

TYPE

ASSUMED BUSINESS NAME

ENTITY NAME

SHADOWBUCK WINERY

BUSINESS ACTIVITY

FARMING VINEYARD AND WINERY

PRINCIPAL PLACE OF BUSINESS

5985 MASON RD
THE DALLES OR 97058 USA

NAME & ADDRESS OF AUTHORIZED REPRESENTATIVE

TOM PETERS

PO BOX 65507
VANCOUVER WA 98665 USA

REGISTRANT/OWNER

54810792 - SHADOWBUCK FARM L.L.C.

5985 MASON RD
THE DALLES OR 97058 USA

COUNTIES

WASCO

I declare as an authorized signer, 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

TOM PETERS

TITLE

REGISTRANT

DATE SIGNED

11-05-2020