APPLICATION FOR REGISTRATION

Corporation Division
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E-FILED
Jun 22, 2022
OREGON SECRETARY OF STATE

REGISTRY NUMBER

198022395

TYPE

ASSUMED BUSINESS NAME

ENTITY NAME

MARTI CERSOVSKI

BUSINESS

BUSINESS CONSULTANT

PRINCIPAL PLACE OF BUSINESS

2727 LAWNRIDGE ST SW
ALBANY OR 97321 USA

NAME & ADDRESS OF AUTHORIZED REPRESENTATIVE

MARTI CERSOVSKI

2727 LAWNRIDGE ST SW
ALBANY OR 97321 USA

REGISTRANT/OWNER

MARTI CERSOVSKI

2727 LAWNRIDGE ST SW
ALBANY OR 97321 USA

COUNTIES

BAKER, BENTON, CLACKAMAS, CLATSOP, COLUMBIA, COOS, CROOK, CURRY, DESCHUTES, DOUGLAS, GILLIAM, GRANT, HARNEY, HOOD RIVER, JACKSON, JEFFERSON, JOSEPHINE, KLAMATH, LAKE, LANE, LINCOLN, LINN, MALHEUR, MARION, MORROW, MULTNOMAH, POLK, SHERMAN, TILLAMOOK, UMATILLA, UNION, WALLOWA, WASCO, WASHINGTON, WHEELER, YAMHILL

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

MARTI CERSOVSKI

TITLE

REGISTRANT

DATE

06-21-2022