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

Phone: (503) 986-2200
FAX: (503) 378-4381
sos.oregon.gov/business

Registry Number: 58218380
Date of Incorporation: 6/26/1997

Type: DOMESTIC LIMITED LIABILITY COMPANY

FILED: APR 7, 2023
OREGON SECRETARY OF STATE

58218380-24654339

GUNNER LLC **REIANA**

GUNNER LLC
EMAILED
TUALATIN OR 97062

RE: GUNNER LLC
REINSTATEMENT AMENDED

Please complete and return this letter and any enclosed documents for filing the requested reinstatement/reactivation.

Your entity has been dissolved because your date of duration has expired. To reinstate your entity complete and return the ENCLOSED amendment form with this letter.

Submit $200 for the required fees.

The above entity hereby requests to be active on the records of the Corporation Division. The effective date of administrative dissolution is 2/23/2023.

The reason(s) for administrative cancellation has been eliminated or did not exist.

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.

BY _____ **DATE** 03/08/2023

(Authorized Signature)

Any fees submitted with this document are nonrefundable and will be held for 45 days. If filing within 45 days no additional fees will be due unless otherwise stated in this letter.

Business Registry
Corporation Division
(503) 986-2200

BRAORR
3/8/2023

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255 Capitol Street NE, Suite 151
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REINSTATEMENT ANNUAL REPORT

REGISTRY NUMBER: 58218380
DATE OF FILING: 6/26/1997
FEE: $100
DUE DATE:
TYPE: DOMESTIC LIMITED LIABILITY COMPANY

GUNNER LLC
PO BOX 2176
TUALATIN OR 97062

Business Name:
GUNNER LLC

Jurisdiction: OREGON

The following information is required by statute. Please complete the information below. If any of the information is incorrect, you can make changes on this form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

REGISTERED AGENT:
ZACHARY DABLOW, P.C.

STREET ADDRESS: (Must be an Oregon Physical Street Address)
494 STATE ST STE 300D, SALEM, OR 97301

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

Type of Business: PROPERTY MANAGEMENT

Principal Place of Business Address:
(Physical Street Address)
18150 SW BOONES FERRY RD, PORTLAND, OR 97224

Mailing Address:
PO BOX 2176, TUALATIN, OR 97062

Member(s) or Manager(s) Title, Name and Address:

MEMBER - WILFRED FAMILY LLC	PO BOX 2176, TUALATIN, OR 97062

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.

Signature Dean Pollman **Printed Name** Dean Pollman

Date 03/08/2023 **Phone Number** 971-224-2244

Make check payable to "Corporation Division" and mail completed form with payment 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.

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Registry Number: 58218380
Date of Incorporation: 6/26/1997

Type: DOMESTIC LIMITED LIABILITY COMPANY

GUNNER LLC
PO BOX 2176
TUALATIN OR 97062

RE: GUNNER LLC
REINSTATEMENT AMENDED

Please complete and return this letter and any enclosed documents for filing the requested reinstatement/reactivation.
We are unable to process your document due to the following reason(s):

We have received your processing fee and no additional fees are required at this time.

We are holding the documents you submitted in our office. Complete the action(s) requested in this letter so we may process your filing.

The reason(s) for administrative cancellation has been eliminated or did not exist.

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.

BY _____ **DATE** 04/06/2023
(Authorized Signature)

Any fees submitted with this document are nonrefundable and will be held for 45 days. If filing within 45 days no additional fees will be due unless otherwise stated in this letter.

Business Registry
Corporation Division
(503) 986-2200