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

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

Assumed Business Name Reactivation
Registry Number: 75481391
Date of Registration: 03/08/2011

FILED: SEP 15, 2023
OREGON SECRETARY OF STATE

75481391-25288692

CD BABY REAABN

Name of Assumed Business Name Registration:
CD BABY

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

Submit $100 for the required fees.

The above entity hereby requests to be active on the records of the Corporation Division. The effective date of administrative cancellation is 05/04/2023

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

By: _____ Date: 9/12/23
(Authorized Signature)

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

Business Registry
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(503) 986-2200

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Registry Number: 75481391
Date of Registration: 03/08/2011

Note: Renewal due every two years

Name of Assumed Business Name Registration:
CD BABY

The following information is required by statute. Please complete the entire form. If any of the information is incorrect you can make changes on this form.

Principal Place of Business: (Physical Street Address) 9600 NE CASCADES PARKWAY SUITE 180 PORTLAND OR 97220

Authorized Representative: JAMES BALL
Mailing Address: 9600 NE CASCADES PARKWAY SUITE 180 PORTLAND OR 97220

Registrant(s) - Name(s) and Physical Address(es):
AUDIO AND VIDEO LABS, INC. 9600 NE CASCADES PKWY STE 180 PORTLAND OR 97220

Counties:

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

Business Description: (Primary business activity) AUDIO DIGITAL DISTRIBUTION

Signatures: New registrants must sign. If any Registrants are WITHDRAWING, withdrawing Registrants or Authorized Representative must sign.

By my signature, I declare as an authorizing authority, 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.

Signature: Scott
Contact Name: Scott Williams

Signature: _____
Phone Number: _____

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.