Assumed Business Name - Amendment

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem,

Complete only the sections that you are upd:
To review current information, please go to: sos

FILED: FEB 9, 2024
OREGON SECRETARY OF STATE

60944296-25877045

REGISTRY NUMBER: 609442-96

SPEARHEAD ROOFING LLC **AMDREG**

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in **Black** Ink. Attach Additional Sheet if Necessary.

1. **CURRENT BUSINESS NAME:** Spearhead Roofing LLC*
2. **NEW BUSINESS NAME:** (If changed, $50 fee required)
3. **DESCRIPTION OF BUSINESS:**
4. **PRINCIPAL PLACE OF BUSINESS:** (Street Address, City, State, Zip)
   2720 Montelius ST Klamath Falls OR 97601*
5. **NAME OF AUTHORIZED REPRESENTATIVE:** (One name only) **CONTINUING** ○ or **NEW** ●
   Linda Mendoza, Office Manager
6. **MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE:**
   2720 Montelius ST Klamath Falls OR 97601*
7. **REGISTRANTS/OWNERS:** (List name and publicly available street address of new registrants)(Attach separate sheet if needed)

   a. **NEW REGISTRANTS/OWNERS:** Street Address City State Zip

   b. **WITHDRAWING REGISTRANTS/OWNERS:**

8. **CURRENT REGISTRANTS/OWNERS ADDRESS CHANGE ONLY:** (This section is only for registrant address changes) (Attach separate sheet if needed)
   Registrant Name Street Address City State Zip
   Powless Construction Company ~~Spearhead Roofing~~ LLC, 2720 Montelius Street, Klamath Falls OR 97601

9. COUNTIES:

	☐ Baker	☐ Crook	☐ Harney	☐ Lake	☐ Morrow	☐ Union
	☐ Benton	☐ Curry	☐ Hood River	☐ Lane	☐ Multnomah	☐ Wallowa
☒ ALL COUNTIES (Statewide)	☐ Clackamas	☐ Deschutes	☐ Jackson	☐ Lincoln	☐ Polk	☐ Wasco
	☐ Clatsop	☐ Douglas	☐ Jefferson	☐ Linn	☐ Sherman	☐ Washington
	☐ Columbia	☐ Gilliam	☐ Josephine	☐ Malheur	☐ Tillamook	☐ Wheeler
	☐ Coos	☐ Grant	☐ Klamath	☐ Marion	☐ Umatilla	☐ Yamhill

10. **SIGNATURE(S):** New Registrants must sign. If any Registrants are WITHDRAWING, withdrawing Registrants or Authorized Representative must sign. I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. 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: [signature] **Printed Name:** Garrett Powless

CONTACT NAME: (To resolve questions with this filing)
Linda Mendoza, Office Manager

PHONE NUMBER: (Include area code)
541-205-3177

FEES *Spoke to customer via phone to verify info 2/9 AR

If Changing Business Name $50

No Fee For Other Changes

Processing Fees are nonrefundable. Please make check payable to "Corporation Division".

Free copies are available at sos.oregon.gov/business using the Business Name Search program.

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