



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

Articles of Organization - Limited Liability Company

REGISTRY NUMBER:

227959798

FILED: JUN 21, 2024  
OREGON SECRETARY OF STATE



227959798-26390908

FREE WAY LOGISTICS LLC

NEWORG

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

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

1. NAME OF LIMITED LIABILITY COMPANY: (Must contain the words "Limited Liability Company" or the abbreviations "LLC" or "L.L.C.")

FREE WAY LOGISTICS LLC

2. DURATION: (Please check one.)

☒ Duration shall be perpetual.

☐ Latest date upon which the Limited Liability Company

is to dissolve is \_\_\_\_\_

3. PRINCIPAL OFFICE: (Must be a physical street address)

13990 Fir St

Oregon City, OR 97045

4. REGISTERED AGENT: (Individual or entity that will accept legal service  
for this business)

Svetlana Rudnitskaya

5. REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS:  
(Must be an Oregon Street Address, which is identical to the  
registered agent's office.)

13990 Fir St

Oregon City, OR 97045

6. ADDRESS WHERE THE DIVISION MAY MAIL NOTICES:

13990 Fir St

Oregon City, OR 97045

7. HOW WILL THIS LIMITED LIABILITY COMPANY BE MANAGED?

☒ This LLC will be member-managed by one or more members.

☐ This LLC will be manager-managed by one or more managers.

8. IF RENDERING A LICENSED PROFESSIONAL SERVICE OR  
SERVICES, DESCRIBE THE SERVICE(S) BEING RENDERED:  
ORS 58.015(5)(m)

9. OPTIONAL PROVISIONS: (Attach a separate sheet if necessary.)

BENEFIT COMPANY: The Limited Liability Company is a benefit  
company subject to sections 1 to 11 of chapter 269, Oregon Laws 2013.  
(additional requirements apply)

☒ INDEMNIFICATION: The company elects to indemnify its  
members, managers, employees, agents for liability and related  
expenses under ORS 63.160 - 63.170.

SEE ATTACHED

10. NAME AND ADDRESS OF EACH PERSON WHO IS FORMING  
THIS BUSINESS: (ORGANIZER)

Sergey Tsarev

16532 SE 82nd Dr #302

Clackamas, OR 97015

LIST MEMBERS AND/OR MANAGERS NAMES AND  
ADDRESSES (MAY BE REQUIRED BY YOUR BANK)

11. OWNERS: (MEMBERS) (Names and Addresses)

Sergey Tsarev

16532 SE 82nd Dr #302

Clackamas, OR 97015

12. MANAGERS: (MANAGERS) (Names and Addresses)

13. INDIVIDUAL WITH DIRECT KNOWLEDGE (Name and Address)

List the name and address of at least one individual who is a member or  
manager of the LLC or an authorized representative with direct knowledge  
of the operations and business activities of the LLC.

Sergey Tsarev

16532 SE 82nd Dr #302

Clackamas, OR 97015

14. EXECUTION/SIGNATURE OF EACH PERSON WHO IS FORMING THIS BUSINESS: (Organizer)

I declare as an authorized signer, 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. 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:

PRINTED NAME:

Sergey Tsarev

TITLE:

Member

CONTACT NAME: (To resolve questions with this filing)

Svetlana Rudnitskaya

PHONE NUMBER: (Include area code)

503-347-6371

Articles of Organization - Limited Liability Company 11/17)

FEES

Required Processing Fee \$100

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

Free copies are available at [sos.oregon.gov/business](http://sos.oregon.gov/business) using the Business Name Search program.