

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

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FILED: JUN 21, 2024 **OREGON SECRETARY OF STATE**

BELLIS REALTY GROUP

AMDREG

REGISTRY NUMBER:	1408841-98

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. 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: BELLIS REALTY GROUP 2. NEW BUSINESS NAME: (If changed, \$50 fee required) 3. DESCRIPTION OF BUSINESS: REAL ESTATE 4. PRINCIPAL PLACE OF BUSINESS: (Street Address, City, State, Zip) 3605 SW MULTNOMAH BOULEVARD, PORTLAND, OREGON 97219 5. NAME OF AUTHORIZED REPRESENTATIVE: (One name only) CONTINUING O or NEW (O JAZZMIN REECE 6. MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE: 3605 SW MULTNOMAH BOULEVARD, PORTLAND, OREGON 97219 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 N/A **b. WITHDRAWING REGISTRANTS/OWNERS:** N/A 8. CURRENTIREGISTRANTS/OWNERS ADDRESS CHANGEIONLY: (This section is only for registrant address changes) (Attach separate sheet if needed) Street Address JAZZMIN REECE, 3605 SW MULTNOMAH BOULEVARD, PORTLAND, OREGON 97219 9. COUNTIES: Baker Crook ☐ Morrow ☐ Harney ☐ Lake □ Union ☐ Benton ☐ Curry ☐ Hood River ☐ Lane ☐ Multnomah **Mallowa** Clackamas Deschutes Jackson **ALL COUNTIES** ☐ Lincoln Polk ☐ Wasco (Statewide) ☐ Clatsop ☐ Douglas ☐ Jefferson Sherman ☐ Linn ☐ Columbia ☐ Gilliam Josephine 🗖 Tillamook Malheur ☐ Coos Grant ☐ Umatilla ☐ Marion ☐ 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: **Printed Name:** JADOMIN H. REECE

CONTACT NAME: (To resolve questions with this filing)

FEES

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.