



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

Assumed Business Name - Amendment

Complete only the sections that you are up
To review current information, please go to: [s](#)

FILED: JUN 21, 2024
OREGON SECRETARY OF STATE



226406999-26391346

REGISTRY NUMBER: 226406999

TRI-BOOTH

AMDREG

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is pub.
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: TRI-BOOTH

2. NEW BUSINESS NAME: (If changed, \$50 fee required)

3. DESCRIPTION OF BUSINESS: ENTERTAINMENT

4. PRINCIPAL PLACE OF BUSINESS: (Street Address, City, State, Zip)

164 EASTBROOK WAY, ASHLAND, OR, 97520

5. NAME OF AUTHORIZED REPRESENTATIVE: (One name only) CONTINUING ☒ or NEW ☐

RICK WASSERMAN

6. MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE:

258 A ST STE 1 74, ASHLAND, OR, 97520

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

BOOKABLE VOICEOVER INC. 258 A ST STE 1 74, ASHLAND, OR, 97520

b. WITHDRAWING REGISTRANTS/OWNERS:

RICK WASSERMAN 258 A ST STE 1 74, ASHLAND, OR, 97520

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

9. COUNTIES: ☐ Baker ☐ Crook ☐ Harney ☐ Lake ☐ Morrow ☐ Union
☐ Benton ☐ Curry ☐ Hood River ☐ Lane ☐ Multnomah ☐ Wallowa
☐ ALL COUNTIES ☐ Clackamas ☐ Deschutes ☒ Jackson ☐ Lincoln ☐ Polk ☐ Wasco
(Statewide) ☐ 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:

Printed Name:

Rick Wasserman

CONTACT NAME: (To resolve questions with this filing)

Rick Wasserman

PHONE NUMBER: (Include area code)

9179121423

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.