

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200 Fax: (503) 378-4381

## Complete only the sections that you are updat

To review current information, please go to: sos.c

REGISTRY NUMBER: 2275 35192





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

n accordance with Oregon We must release this inform					NINA JEWEI	22/535192-2639 LERS	0828 AMDREG								
Please Type or Print Le			•			<del></del>									
1. CURRENT BUSIN	NESS NAME: N	ina Jei	nelecs												
2. NEW BUSINESS NAME: (If changed, \$50 fee required)															
3. DESCRIPTION OF BUSINESS: Retail - Manufacture - impater.															
4. PRINCIPAL PLACE OF BUSINESS: (Street Address, City, State, Zip)															
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		ITATIVE: (One nam	e only) CON	ITINUING (	O or <b>NEW</b> (O										
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a. NEW REGISTRANTS/OWNERS: . Street Address City State 7in															
Sama	Haon	(Street Address, City, State, Zip)    State   P   Reacolo													
b. WITHDRAWING REGISTRANTS/OWNERS:															
Y NiNa	Jeweler	s LLC			Samia	Hadiai	owner								
			E ONLY: (This	section is onl	~··										
Registrant Nam Mian To		10625 S	a rotte	1 in Jue	Pl Rea	State	97008								
•		_				- ((0 0)	(7 - 5 - 5								
9. COUNTIES:	□ Baker	<del></del>	☐ Harney	<b>y</b>	☐ Lake		☐ Union								
ALL COUNTIES (Statewide)	☐ Benton		☐ Hood I		l <del>um</del> t	172243	☐ Wallowa								
	☐ Clackamas	☐ Deschutes	☐ Jackso	n	☐ Lincoln	☐ Polk	☐ Wasco								
(Statewide)	Clatsop	Douglas	☐ Jeffers	on	Linn	☐ Sherman	Washington								
	☐ Columbia	☐ Gilliam	☐ Joseph	nine	☐ Malheur	Tillamook									
	Coos	☐ Grant	☐ Klama	th	☐ 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:  Wan Took  Wan Took															
CONTACT NAME: (To resolve questions with this filing)  FEES											FEES				
Mian Took				If Changing Business Name \$50											
PHONE NUMBER: (Include area code)				No Fee For Other Changes											

503 984-0458