



Assumed Business Name - New Registration

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

FILED: JUN 21, 2024
OREGON SECRETARY OF STATE



227970993-26391507

REGISTRY NUMBER: 224710897 227970993

CENTER FOR MENTAL HEALTH...

NEWREG

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. ASSUMED BUSINESS NAME: (To be registered) Center For Mental Health Continuing Education

Registration or filing of a name does not grant exclusive rights or interests in that name. A name may be available for registration; however, someone else may hold a prior right to that name, or the name may be too similar to another, and may result in a case of legal action brought against the registrant for dilution or unfair competition of someone else's business.

2. DESCRIPTION OF BUSINESS: (Primary business activity)

Education Seminars and Webinars for mental health providers

4. WHO IS AUTHORIZED TO REPRESENT THE OWNERS:

(Authorized Representative) (One name only)

Tara Sanderson

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

11845 SW Greenburg Road Suite 210

Tigard OR 97223

5. MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE:

901 Brutscher Street D141

Newberg OR 97132

6. NAMES OF OWNERS (REGISTRANTS) AND PUBLICLY AVAILABLE ADDRESSES: (List name and street address of each person or entity who will conduct or transact business under the assumed business name.) (Attach a separate sheet if necessary.)

Table with 5 columns: Name, Street Address, City, State, Zip. Rows include Tara Sanderson and Kristie Schmidlkofer at 2355 STATE ST STE 101 SALEM OR 97301 USA.

7. COUNTIES:

- Grid of checkboxes for counties: Baker, Benton, Clackamas, Clatsop, Columbia, Coos, Crook, Curry, Deschutes, Douglas, Gilliam, Grant, Harney, Hood River, Jackson, Jefferson, Josephine, Klamath, Lake, Lane, Lincoln, Linn, Malheur, Marion, Morrow, Multnomah, Polk, Sherman, Tillamook, Umatilla, Union, Wallowa, Wasco, Washington, Wheeler, Yamhill.

8. EXECUTION/SIGNATURE(S): (All owners/registrants 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:

Handwritten signatures of Tara Sanderson and Kristie Schmidlkofer

Printed Name:

Tara Sanderson

Kristie Schmidlkofer

CONTACT NAME: (To resolve questions with this filing)

Tara Sanderson

PHONE NUMBER: (Include area code)

971-264-0879

FEES

Required Processing Fee \$50
Assumed Business Name filings are good for 2 years
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