



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

2024 ANNUAL REPORT
Registry Number: 212771893
Date of Organization: 05/31/2023
Fee: \$100
Due Date: 05/31/2024
Type: DOMESTIC LIMITED LIABILITY COMPANY

WEST COAST AUTO DETAIL 2 LLC
 6997 VILLAGE PLACE NE
 KEIZER OR 97303

FILED: JUN 24, 2024
OREGON SECRETARY OF STATE



212771893-26393189

WEST COAST AUTO DETAIL 2 LLC

RENANA

Name of Domestic Limited Liability Company
 WEST COAST AUTO DETAIL 2 LLC
Jurisdiction: OREGON

The following information is required by statute. Please complete the entire form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

Registered Agent

WALTER ANTONIO QUINTANILLA
 6997 VILLAGE PLACE NE
 KEIZER OR 97303

If the Registered Agent has changed,
 the new agent has consented to the appointment. Oregon
 street address required.

1) Type of Business

2) Principal Place of Business (Address,city,state,zip)

4755 71ST SE
 SALEM OR 97317
 5157 Charleston Dr SE Salem, OR 97317

3) Mailing Address (Address,city,state,zip)

6997 VILLAGE PLACE NE
 KEIZER OR 97303

4) Member or Manager (Name&Address)

WALTER JOYA QUINTANILLA
 6997 VILLAGE PLACE NE
 KEIZER OR 97303

5) Member or Manager (Name&Address)

JUAN CARLOS DUARTE
 1200 COUNTRY CLUB RD
 #235
 WOODBURN OR 97071

Execution:

I declare, 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 on behalf of which the person signs. 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.

6) Signature

7) Printed Name

8) Date

6/24/2024

9) Phone Number

Make check payable to "Corporation Division" and mail to the address above.

Note: Filing fees may be paid with a major credit card. Submit the card number and expiration date on a separate page for your protection.

ANRPF1-
 06/24/24