



Secretary of State
 Corporation Division
 255 Capitol Street NE, Suite 151
 Salem, OR 97310-1327

Phone: (503) 986-2200
 FAX: (503) 378-4381
 sos.oregon.gov/business

2024 ANNUAL REPORT

Registry Number: 213835093
 Date of Organization: 6/27/2023
 Fee: \$100
 Due Date: 6/27/2024
 Type: DOMESTIC LIMITED LIABILITY COMPANY

000986

RENTZ CONSTRUCTION & REMODELING LLC
 1815 WALLACE RD NW
 SALEM OR 97304

FILED: JUN 24, 2024
 OREGON SECRETARY OF STATE



213835093-26393728

RENTZ CONSTRUCTION &...

RENANA

Name of Domestic Limited Liability Company

RENTZ CONSTRUCTION & REMODELING LLC

Jurisdiction: OREGON

The following information is required by statute. Please complete the information below. If any of the information is incorrect, you can make changes on this form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

Registered Agent

DEBRA K RENTZ
 1815 WALLACE RD NW
 SALEM, OR 97304

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

1) **Type of Business** GENERAL CONTRACTING

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

1815 WALLACE RD NW
 SALEM, OR 97304

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

1815 WALLACE RD NW
 SALEM, OR 97304

4) **Member** or **Manager** (Name & Address)

DEBRA K RENTZ
 1815 WALLACE RD NW
 SALEM, OR 97304

5) **Member** or **Manager** (Name & Address)

TIMOTHY J RENTZ
 1815 WALLACE RD NW
 SALEM, OR 97304

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** Debra K Rentz

7) **Printed Name** Debra K Rentz

8) **Date** 06/23/2024

9) **Phone Number** 503-781-0349

Make check payable to "Corporation Division" and mail completed form with payment 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.