## **Corporation/Limited Liability Company - Information Change**

FILED: JUN 24, 2024 OREGON SECRETARY OF STATE

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200 Please Type or Print Legibly in Black ink. Attach Additional Sheet if Necessary. Fax: (503) 378-4381

**REGISTRY NUMBER:** 

Information Change (09/23)

ENTITY TYPE: SOMESTIC OFOREIGN

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is We must release this information to all parties upon request and it will be readed.

e must release this information to all parties upon request and it will be pos		3-26393762	
. NAME OF CORPORATION OR LIMITED LIABILITY COMI	PANY: DP DISPATCH LLC	3-26393762 AAR	
OP DISPATCH LAG			
Complete only 2. BUSINESS ACTIVITY	y the sections that you are updating. 6. ADDRESS WHERE THE DIV	ISION MAY MAIL NOTICES:	
FIGHGHT Wig Patch	0, 1,00 tille 010	iolore with thinke it offices.	
3. PRINCIPAL PLACE OF BUSINESS: (Street Address)	-		
205 BOOME AUSE #11	7 THE NEW REGISTERED AG	ENT HAS CONSENTED TO THIS	
SALEW OF 97306		has been notified in writing of this chang	
I. THE REGISTERED AGENT HAS BEEN CHANGED TO:	•	8. THE STREET ADDRESS OF THE NEW REGISTERED OFFICE AND THE BUSINESS ADDRESS OF THE REGISTERED AGENT ARE IDENTICAL.	
<ol> <li>REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS:         Must be an Oregon Street Address, which is identical to the registered agent's office.     </li> </ol>	List the name and address of at least o shareholder of the corporation (memb	KNOWLEDGE (Names and Addresses one individual who is a director, or controlling per or manager of the LLC) or an authorized of the operations and business activities of	
Business and Professional Corporations list the name and address of Nonprofit Corporations list the name and address of one President a one Treasurer (ORS 65.371).  Limited Liability Companies list the names and addresses of the man member for a member-managed limited liability company (ORS 63.71).  If making changes to this section, list all current names and	f one President and one Secretary (ORS 60.787, ORS 62.455 and one Secretary. Nonprofit Corporations that are Public B magers for a manager-managed limited liability company or 87). Please attach a separate sheet of paper if needed.	Senefit list the name and address of the name and address of at least one	
· · · · · · · · · · · · · · · · · · ·		EASURER - NONPROFIT ONLY: ame and Address)	
1. EXECUTION: I declare as an authorized signer, under politer, or otherwise misrepresent the identity of any person iling has been examined by me and is, to the best of my kind his document is against the law and may be penalized by	n including officers, directors, employees, mem knowledge and belief, true, correct and comple	bers, managers or agents. This	
SIGNATURE:	PRINTED NAME:	TITLE:	
Douglas Prènce	Dovblas Pierce	owaer/ceo	
CONTACT NAME: (To resolve questions with this filing)	FEES		
	No Processing Fee	`	
PHONE NUMBER: (Include area code)	Free copies are available at sos.oregon.gov/busine	ess using the Business Name Search program.	