

FE



Phone: (503) 986-2200  
Fax: (503) 378-4381

Assumed Business Name—New Registration

Secretary of State  
Corporation Division  
255 Capitol St. NE, Suite 151  
Salem, OR 97310-1327  
FilingInOregon.com

FILED

JUN 30 2006

OREGON  
SECRETARY OF STATE

REGISTRY NUMBER: 369722-97  
For office use only

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record.  
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)

SPIN DESIGNS

2) DESCRIPTION OF BUSINESS (Primary business activity)

DESIGN AND CREATE SCULPTURE AND JEWELRY

4) NAME OF AUTHORIZED REPRESENTATIVE (One name only)

MICHELLE BERLIN

3) PRINCIPAL PLACE OF BUSINESS (Address, city, state, zip)

3439 N.E. SANDY BLVD. #224  
PORTLAND, OR. 97232

5) MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE

3439 N.E. SANDY BLVD. #224  
PORTLAND, OR. 97232

6) REGISTRANT'S/OWNER PUBLICLY AVAILABLE ADDRESS (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.)

NAME	STREET ADDRESS	CITY/STATE/ZIP
<u>MICHELLE BERLIN</u>	<u>3439 N.E. SANDY BLVD #224</u>	<u>PORTLAND, OR. 97232</u>
<u>DEE DEE PLOOG</u>	<u>3439 N.E. SANDY BLVD #224</u>	<u>PORTLAND, OR. 97232</u>

- 7) COUNTIES
- |  |                                    |                                     |                                  |                                    |                                     |
|--|------------------------------------|-------------------------------------|----------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Baker                               | <input type="checkbox"/> Crook     | <input type="checkbox"/> Harney     | <input type="checkbox"/> Lake    | <input type="checkbox"/> Morrow    | <input type="checkbox"/> Union      |
| <input type="checkbox"/> Benton                              | <input type="checkbox"/> Curry     | <input type="checkbox"/> Hood River | <input type="checkbox"/> Lane    | <input type="checkbox"/> Multnomah | <input type="checkbox"/> Wallowa    |
| <input checked="" type="checkbox"/> ALL COUNTIES (Statewide) | <input type="checkbox"/> Clackamas | <input type="checkbox"/> Deschutes  | <input type="checkbox"/> Jackson | <input type="checkbox"/> Polk      | <input type="checkbox"/> Wasco      |
| <input type="checkbox"/> Clatsop                             | <input type="checkbox"/> Douglas   | <input type="checkbox"/> Jefferson  | <input type="checkbox"/> Linn    | <input type="checkbox"/> Sherman   | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Columbia                            | <input type="checkbox"/> Gilliam   | <input type="checkbox"/> Josephine  | <input type="checkbox"/> Malheur | <input type="checkbox"/> Tillamook | <input type="checkbox"/> Wheeler    |
| <input type="checkbox"/> Coos                                | <input type="checkbox"/> Grant     | <input type="checkbox"/> Klamath    | <input type="checkbox"/> Marion  | <input type="checkbox"/> Umatilla  | <input type="checkbox"/> Yamhill    |

8) SIGNATURES (All registrants/owners must sign)

[Signatures]

9) CONTACT NAME (To resolve questions with this filing)

DEE DEE PLOOG

DAYTIME PHONE NUMBER (Include area code.)

503 235 5644

6-29-06 16 19 55 -

**FEES**

Required Processing Fee \$50  
Confirmation Copy (Optional) \$5  
Processing Fees are nonrefundable.

Please make check payable to "Corporation Division."

NOTE:  
Fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.

5/21/30