

APPLICATION FOR REGISTRATION



Corporation Division
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E-FILED
Mar 13, 2017
OREGON SECRETARY OF STATE

REGISTRY NUMBER

129967790

TYPE

ASSUMED BUSINESS NAME

ENTITY NAME

MENTOR SUPPORT COLLABORATIVE

BUSINESS ACTIVITY

TRAINING AND EQUIPPING MENTORS WITHIN CHURCHES TO OFFER SAFETY, HOPE, AND HEALING FROM ABUSE, INCLUDING SEXUAL EXPLOITATION.

PRINCIPAL PLACE OF BUSINESS

13203 SE 172ND AVE
STE 166 #228
HAPPY VALLEY OR 97086 USA

NAME & ADDRESS OF AUTHORIZED REPRESENTATIVE

DARLENE LOUISE DOMENIGONI

13203 SE 172ND AVE
STE 166 # 228
HAPPY VALLEY OR 97086 USA

REGISTRANT/OWNER

DARLENE LOUISE DOMENIGONI

14221 SE 187TH AVE
DAMASCUS OR 97089 USA

COUNTIES

CLACKAMAS, MULTNOMAH, WASHINGTON



By my signature, I declare as an authorized authority, that 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.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

ELECTRONIC SIGNATURE

NAME

DARLENE LOUISE DOMENIGONI

TITLE

REGISTRANT

DATE SIGNED

03-13-2017