## RENEWAL OF REGISTRATION



#### E-FILED

Feb 07, 2019

**OREGON SECRETARY OF STATE** 

#### **REGISTRY NUMBER**

75831991

#### **REGISTRATION DATE**

03/21/2011

### **BUSINESS NAME**

TOUCHMARK AT FAIRWAY VILLAGE HEALTH AND FITNESS CLUB

### **BUSINESS ACTIVITY**

HEALTH AND FITNESS CLUB

#### **TYPE**

ASSUMED BUSINESS NAME

## PRIMARY PLACE OF BUSINESS

2927 SE VILLAGE LOOP VANCOUVER WA 98683 USA

### **JURISDICTION**

**OREGON** 

### **COUNTIES**

BAKER, BENTON, CLACKAMAS, CLATSOP, COLUMBIA, COOS, CROOK, CURRY, DESCHUTES, DOUGLAS, GILLIAM, GRANT, HARNEY, HOOD RIVER, JACKSON, JEFFERSON, JOSEPHINE, KLAMATH, LAKE, LANE, LINCOLN, LINN, MALHEUR, MARION, MORROW, MULTNOMAH, POLK, SHERMAN, TILLAMOOK, UMATILLA, UNION, WALLOWA, WASCO, WASHINGTON, WHEELER, YAMHILL

## **AUTHORIZED REPRESENTATIVE**

46227583 - TOUCHMARK AT FAIRWAY VILLAGE, LLC

5150 SW GRIFFITH DRIVE BEAVERTON OR 97005 USA

### **REGISTRANT/OWNER**

46227583 - TOUCHMARK AT FAIRWAY VILLAGE, LLC

5150 SW GRIFFITH DRIVE BEAVERTON OR 97005 USA



# **OREGON SECRETARY OF STATE**

I declare as an authorized signer, 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** 

**HEATHER HANSEN** 

**TITLE** 

**AUTHORIZED REPRESENTATIVE** 

**DATE SIGNED** 

02-07-2019