

# ARTICLES OF ORGANIZATION



Corporation Division  
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**E-FILED**  
Aug 12, 2020  
**OREGON SECRETARY OF STATE**

## REGISTRY NUMBER

170629191

## TYPE

DOMESTIC LIMITED LIABILITY COMPANY

## 1. ENTITY NAME

MOCTUS LLC

## 2. MAILING ADDRESS

1720 SW 4TH AVE  
APT 125  
PORTLAND OR 97201 USA

## 3. PRINCIPAL PLACE OF BUSINESS

1720 SW 4TH AVE  
APT 125  
PORTLAND OR 97201 USA

## 4. NAME & ADDRESS OF REGISTERED AGENT

ANASTASIIA RIABETS  
  
1720 SW 4TH AVE  
APT 125  
PORTLAND OR 97201 USA

## 5. ORGANIZERS

ANASTASIIA RIABETS  
  
1720 SW 4TH AVE  
APT 125  
PORTLAND OR 97201 USA

## 6. INDIVIDUALS WITH DIRECT KNOWLEDGE

ANASTASIIA RIABETS  
  
1720 SW 4TH AVE  
APT 125  
PORTLAND OR 97201 USA

## 7. INITIAL MEMBERS/MANAGERS

### MANAGER

ANASTASIIA RIABETS



1720 SW 4TH AVE  
APT 125  
PORTLAND OR 97201 USA

**8. DURATION**

PERPETUAL

**9. MANAGEMENT**

This Limited Liability Company will be member-managed by one or more members

**10. OPTIONAL PROVISIONS**

The company elects to indemnify its members, managers, employees, agents for liability and related expenses under ORS 63.160 to 63.170.

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 officers, managers, members 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.

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**

ANASTASIIA RIABETS

**TITLE**

ORGANIZER

**DATE SIGNED**

08-12-2020