



Articles of Amendment - Nonprofit

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 -- sos.oregon.gov/business - Phone: (503) 986-2200

FILED: JAN 25, 2021
OREGON SECRETARY OF STATE



32558298-21766273

REGISTRY NUMBER: 325582-98

RELIEF ANGELS

AMDART

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

1) ENTITY NAME: Emergency Equipment Solutions - (To Become "Relief Angels")

2) STATE THE ARTICLE NUMBER(S): and set forth the article(s) as it is amended to read. (Attach a separate sheet if necessary.)

1) name - 2) address 3) Registered Agent 4) Incorporators

#

Please see attached sheet

3) THE AMENDMENT WAS ADOPTED ON: 12/14/2020

(If more than one amendment was adopted, identify the date of adoption of each amendment.)

4) CHECK THE APPROPRIATE STATEMENT:

Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.

Membership approval was required.

The membership vote was as follows:

Class(es) entitled to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST
<u>Pres, Vice, Treas (3)</u>	<u>3</u>	<u>3</u>	<u>3</u>	<u>0</u>

5) EXECUTION: (Must be signed by at least one officer or director.)

I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. 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.

Signature:

Printed Name:

Title:

Valerie O'Dai

Valerie O'Dai

Executive Director/President

CONTACT NAME: (To resolve questions with this filing)

Valerie O'Dai

PHONE NUMBER: (Include area code.)

(503) 663-6050

FEES

Required Processing Fee \$50

No Fee for Nonprofit Type Change.

Processing Fees are nonrefundable. Please make check payable to "Corporation Division."

Free copies are available at sos.oregon.gov/business, using the Business Name Search program.

325582-98

1. ENTITY NAME

RELIEF ANGELS

2. MAILING ADDRESS

5302 Valleywood Dr
Klamath Falls, OR 97603 USA

3. NAME & ADDRESS OF REGISTERED AGENT

VALERIE O'DAI
5302 Valleywood Dr
Klamath Falls, OR 97603 USA

4. INCORPORATORS

Vice President

JESSE BONIFER

847 N HUNT

ATHENA OR 97813 USA

Secretary/ Treasurer

LAURIE HARVEY

84943 TUM A LUM RD

MILTON FREEWATER OR 97862 USA

*The new registered agent (Valerie O'Dai) has consented
to this appointment.*

Valerie O'Dai