

**Assumed Business Name - Amendment**

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200
Fax: (503) 378-4381

Complete only the sections that you are up
To review current information, please go to: sos.oregon.gov/business

FILED: OCT 1, 2021
OREGON SECRETARY OF STATE



180139298-22630290

JACKSON GROUP PETERBILT -...

AMDREG

REGISTRY NUMBER: 180139298

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.

Please Type or Print Legibly in **Black Ink**. Attach Additional Sheet if Necessary.

1. CURRENT BUSINESS NAME: JACKSON GROUP PETERBILT - PORTLAND

2. NEW BUSINESS NAME: (If changed, \$50 fee required) JACKSON GROUP PETERBILT - PORTLAND LAGOON

3. DESCRIPTION OF BUSINESS: Any and all lawful business

4. PRINCIPAL PLACE OF BUSINESS: (Street Address, City, State, Zip)

1910 S 5500 W, Salt Lake City, UT 84104

5. NAME OF AUTHORIZED REPRESENTATIVE: (One name only) **CONTINUING** ☒ or **NEW** ☐

Jan McConnell

6. MAILING ADDRESS OF AUTHORIZED REPRESENTATIVE:

9350 S 150 E Ste 820, Sandy, UT 84070

7. REGISTRANTS/OWNERS: (List name and publicly available street address of new registrants)(Attach separate sheet if needed)

a. NEW REGISTRANTS/OWNERS: Street Address City State Zip

b. WITHDRAWING REGISTRANTS/OWNERS:

8. CURRENT REGISTRANTS/OWNERS ADDRESS CHANGE ONLY: (This section is only for registrant address changes)(Attach separate sheet if needed)

Registrant Name Street Address City State Zip

9. 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"/> Lincoln	<input type="checkbox"/> Polk
<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

10. SIGNATURE(S): New Registrants must sign. If any Registrants are WITHDRAWING, withdrawing Registrants or Authorized Representative must sign. 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:

Jan McConnell

Printed Name:

Jan McConnell

Authorized Agent

CONTACT NAME: (To resolve questions with this filing)

Jan McConnell

PHONE NUMBER: (Include area code)

801-323-2119

Assumed Business Name - Amendment (11/17)

FEES

If Changing Business Name \$50

No Fee For Other Changes

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.