

AMENDED ANNUAL REPORT



Corporation Division
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E-FILED
Nov 22, 2021
OREGON SECRETARY OF STATE

REGISTRY NUMBER

149693798

REGISTRATION DATE

11/19/2018

BUSINESS NAME

NATURALLY HEALTHY FAMILIES OF CENTRAL OREGON LLC

BUSINESS

NATUROPATHIC MEDICINE

MAILING ADDRESS

2130 SW CANYON DR APT D
REDMOND OR 97756 USA

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

PRIMARY PLACE OF BUSINESS

818 SW FOREST AVE
REDMOND OR 97756 USA

JURISDICTION

OREGON

REGISTERED AGENT

JAMI HEYTING

2130 SW CANYON DR APT D
REDMOND OR 97756 USA

If the Registered Agent has changed, the new agent has consented to the appointment.

MEMBER

MICHAEL HEYTING

2130 SW CANYON DR APT D
REDMOND OR 97756 USA

MEMBER

JAMI HEYTING

2130 SW CANYON DR APT D
REDMOND OR 97756 USA



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

JAMI HEYTING

TITLE

MANAGER

DATE

11-22-2021