

**Articles of Amendment - Nonprofit**Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - <http://www.FilingInOregon.com> - Phone: (503) 986-2200**FILED****MAR 17 2011****OREGON
SECRETARY OF STATE****REGISTRY NUMBER:** 603124-86In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record.
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:** Compassion In Dying of Oregon2) **STATE THE ARTICLE NUMBER(S):** and set forth the article(s) as it is amended to read. (Attach a separate sheet if necessary.)Changing name of organization to : Compassion & Choices of Oregon3) **THE AMENDMENT WAS ADOPTED ON:** January 1, 2011

(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

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

By my signature, I declare as an authorized authority, 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.

Signature:

Printed Name:

Jason Renaud

Title:

Executive Director**CONTACT NAME:** (To resolve questions with this filing.)Jason Renaud**PHONE NUMBER:** (Include area code.)503-525-1956**FEES**

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