



勾选下方适当的方框:

Check the appropriate box below:

外来商业公司
(仅完整填写 1、2、3、4、5、6、7、8、9、11)
FOREIGN BUSINESS CORPORATION
(Complete only 1, 2, 3, 4, 5, 6, 7, 8, 9, 11)

外来专业公司
(完整填写所有项目)
FOREIGN PROFESSIONAL CORPORATION
(Complete all items)

登记号:

REGISTRY NUMBER:

仅供办公使用
For office use only

根据俄勒冈州修订法规第 192.410-192.490 款, 本申请表所载信息属于公共记录。我们必须根据要求向各方发布此信息, 并将其公布在我们的网站上。

In 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.

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请用黑色墨水清楚地打印或书写。如有需要, 另加纸张。
Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

1) 公司名称:

NAME OF CORPORATION: _____

注: 必须与原地管辖区的记录名称相同。
NOTE: Must be identical to the name of record in home jurisdiction.

2) 原地管辖区的登记号

REGISTRY NUMBER IN HOME JURISDICTION: _____

8) 可供邮寄通知的地址:

ADDRESS FOR MAILING NOTICES: _____

或者:

OR:

存在证明

CERTIFICATE OF EXISTENCE

(随附)

(ATTACHED)

(请提供来自实体原地管辖区的可通过网络验证的登记号。某些州(如特拉华州和新泽西州)不提供在线状态信息。来自此类地点的实体必须改为随附正式的存在证明, 该证明在交付至本办事处 60 天内有效。)

(Please provide a web-verifiable registry number from the entity's home jurisdiction. Certain states, such as Delaware and New Jersey, do not provide status information online. Entities from such places must instead attach an official certificate of existence, current within 60 days of delivery to this office.)

3) 公司登记日期:

DATE OF INCORPORATION: _____

持续时间 (若非永续):

DURATION, IF NOT PERPETUAL: _____

4) 组织所在州或国家:

STATE OR COUNTRY OF ORGANIZATION: _____

5) 企业主要办事处地址:

(地址、市、州、邮政编码)
ADDRESS OF PRINCIPAL OFFICE OF THE BUSINESS:
(Address, city, state, zip)

6) 俄勒冈州注册代理人姓名:

NAME OF OREGON REGISTERED AGENT: _____

7) 注册代理人的公开可用地址: (必须为俄勒冈州街道地址, 与注册代理人的业务办公室是同一地址。)

REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS: (Must be an Oregon Street Address which is identical to the registered agent's business office.)

9) 董事长和秘书的姓名和地址:

NAME AND ADDRESS OF PRESIDENT AND SECRETARY:

董事长:

President: _____

地址:

Address: _____

秘书:

Secretary: _____

地址:

Address: _____

仅限专业公司

PROFESSIONAL CORPORATION ONLY

10) 专业/商业服务: (列出专业服务及待提供的其他商业服务 (如适用)。)

PROFESSIONAL/BUSINESS SERVICES: (List professional service(s) and other business services, if applicable, to be rendered.)

11) **执行:** (必须经至少一名管理人员或董事签署。)

本人以授权签署人身份声明, 根据作为受罚的规定, 本文件不会以欺诈方式隐瞒、模糊、修改或以其他方式歪曲个人或公司任何管理人员、董事、员工或代理人的身份。本人已检查此档案, 据本人所知所信, 档案真实、正确且完整。在本文件中作虚假陈述是违法的, 可能受到罚款、监禁或两者兼施的处罚。

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, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, directors, employees or agents of the corporation. 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.

签名:
Signature:

印刷体姓名:
Printed Name:

职衔:
Title:

联系人姓名: (需解决本档案的相关问题。)

CONTACT NAME: (To resolve questions with this filing.)

电话号码: (请包括区号。)

PHONE NUMBER: (Please include area code.)

费用

FEES

必缴手续费 275 美元
Required Processing Fee

手续费恕不退还。
Processing Fees are nonrefundable.

支票抬头请写“公司部”。
Please make check payable to "Corporation Division."

使用企业名称搜索程序可在 <http://sos.oregon.gov/business> 网站上
Free copies are available at <http://sos.oregon.gov/business>, using the Business Name Search program.