



Request for Certificate

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - <http://www.FilingInOregon.com> - Phone: (503) 986-2200

Copy Request Fax: 503-378-6520

Requests are processed in the order they are received and within three business days.

REQUESTER INFORMATION:

Name of Requester: _____

Mailing Address: (Street Address or PO Box) _____

(City, State) _____

(Zip Code) _____

Area Code and Phone Number: _____

ENTITY NAME/REGISTRY NUMBER: Information is located at <http://sos.oregon.gov/bizsearch>

Entity Name: _____

Registry Number: _____

CERTIFICATE ATTESTING TO:

STATUS/EXISTENCE - \$10

MERGER - \$10

NAME CHANGE - \$10

NO RECORD - \$10

For more information about the certificates that we provide, visit <http://sos.oregon.gov/business/Pages/business-registry-certificates.aspx>

If document is going out of the Country: (Additional \$10 for Authentication) **What Country?** _____

DELIVERY: Choose Delivery Option(s) *(Please note: There is a separate charge per delivery.)*

Pick up in person.

Mail to above address.

Fax: (USA Only - Area Code & Fax Number) _____

For all overnight/express service delivery, a prepaid airbill must be provided.

METHOD OF PAYMENT:

Check/Money order is included. (Make payable to Corporation Division.)

MasterCard

VISA

Discover

CREDIT CARD NUMBER:

American Express

CREDIT CARD NUMBER:

Expiration Date: _____

Cardholder Name: _____

Billing Address: _____

City, State, Zip Code: _____

Phone Number: _____