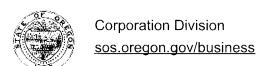
# **AMENDED ANNUAL REPORT**



#### E-FILED

Feb 12, 2024

**OREGON SECRETARY OF STATE** 

#### **REGISTRY NUMBER**

61878881

#### **REGISTRATION DATE**

02/20/1998

#### **BUSINESS NAME**

EQUITABLE CENTER, L.L.C.

#### **BUSINESS ACTIVITY**

COMMERCIAL REAL ESTATE

## **MAILING ADDRESS**

C/O WASHINGTON MANAGEMENT 4554 CALIFORNIA AVE SW SEATTLE WA 98116 USA

#### TYPE

FOREIGN LIMITED LIABILITY COMPANY

#### **PRIMARY PLACE OF BUSINESS**

530 CENTER ST NE #110 SALEM OR 97301 USA

### **JURISDICTION**

WASHINGTON

#### **REGISTERED AGENT**

JEROME O COHEN

530 CENTER STREET NE SUITE 110

SALEM OR 97301 USA

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

#### **MANAGER**

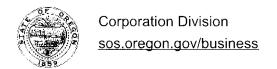
MIKE COHEN

4554 CALIFORNIA AVE SW SEATTLE WA 98116 USA

### **MANAGER**

JEROME O COHEN

4554 CALIFORNIA AVE SW SEATTLE WA 98116 USA



#### **OREGON SECRETARY OF STATE**

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

LAURIE MILLER

TITLE

**AUTHORIZED AGENT** 

DATE

02-12-2024