

Book 2021 Page 3777 Type 06 005 Pages 1 Date 9/08/2021 Time 11:34:49AM

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LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

Kevin M. Farlow, 502 N. Morgan, St. Charles, IA 50240 To: (515) 975-9961 **Return Document To:** TRADE NAME Verified statements of person or co-partnership conducting a business under trade name or assumed name. (Chapter 547, Code of Iowa) State of lowa, Madisan __ County. Name of Person(s) Owning or Having interest in the Business: 50240 50 <u> Jin</u> Address City Zip Name State Name Address City State Zip Address Name City State Zip Name **Address** City State Zip Check One Box Per Form I (we) in compliance with the provisions of Chapter 547, Code of Iowa, hereby establish or amend Trade Name as follows: (are Morgan Complete Business Address (Required) Original Book Page □Add/ Withdrawal name(s) of Partner(s) Name of Business Original Book □Change of Address Business/ Home (Circle One) **Complete Address** Name of Business Original Book Page And there is no one except those mentioned in the foregoing list who owns or has any interest in the above-named business. We further certify that a corrected statement will be filed in the future each time there may be any change in ownership, as provided by Section 547.2, Code of Printed Name Signature Date Signed: **Printed Name** Signature Date Signed: Printed Name Signature

Signature

Signature

orn to before me by the said PARTNERS/OWNER(S) this

y Public in and for County, Iowa Nota

Printed Name

Printed Name



Date Signed:

Date Signed: _