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INDX ✓  
ANNO ✓  
SCAN ✓  
CHEK

LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

✓ Kelly Daniels 1749 Quarry Trail Winifred, IA 50273 851-9194 SIS

Prepared By: (Name, Address, City, State, Zip, Phone #)

Same

Return Document To: (Name & Complete Address if different from Preparer Info)

### Trade Name

Verified statements of person or co-partnership conducting a business under a trade name or assumed name. (Chapter 547, Code of Iowa) STATE OF IOWA, MADISON COUNTY.

Names of Person(s) Owning or Having Interest in the Business:

Kelly Daniels	1749 Quarry Trail	Winifred	IA	50273
Name	Address	City	IA	Zip
			IA	
Name	Address	City		Zip
			IA	
Name	Address	City		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:

- Establish Trade Name HEDGEWOOD EQUIPMENT  
Name of Business  
1749 Quarry Trail Winifred IA 50273  
Complete Business Address (Required)
- Dissolve Trade Name \_\_\_\_\_  
Original Book \_\_\_\_\_ Page \_\_\_\_\_
- Add/Withdrawal name(s) of Partner(s) \_\_\_\_\_  
Name of Business \_\_\_\_\_ Original Book \_\_\_\_\_ Page \_\_\_\_\_
- Change of Address \_\_\_\_\_  
Business / Home (Circle One) Complete Address  
Name of Business \_\_\_\_\_ Original Book \_\_\_\_\_ Page \_\_\_\_\_

And that there is no one except those mentioned in the foregoing list who owns or has any interest in the above named business. I (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 Iowa.

<u>Kelly Daniels</u>	X	<u>Kelly Daniels</u>	Date Signed: <u>7-13-16</u>
Printed Name		Signature	
	X		Date Signed:
Printed Name		Signature	
	X		Date Signed:
Printed Name		Signature	

Subscribed in my presence and sworn to before me by the said Kelly Daniels  
this 13<sup>th</sup> day of July 2016.

X Shelley D Kaster Notary Public in and for Madison COUNTY, Iowa.

