Book 2017 Page 1727 Type 06 005 Pages 1 Date 6/02/2017 Time 4:02:01PM Rec Amt \$7 00 IND

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INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

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	Randy F	Taken	2940 Cum	mina Pol	16 y Motor
	Prepared By: (Name, Address	ss, City, State, Zip, Phone	#)	Milly Ma.	VEN NIGHT
	50261	5/5	468-8093		
	Return Document To: (Name	& Complete Address if di	ifferent from Preparer Info)		
Verif	ied statements of person or co	narthership conducting	Trade Name g a business under a trade name or a	ssumed name (Chart	res FAZ Codo of Journ CTATE
OF IC	DWA, MADISON COUNTY.	-partnership conducting	s a business under a trade name or a	ssumed name. (Chapt	er 547, code of lowar STATE
Nam	nes of Person(s) Owning or Havir	ng Interest in the Business	:,		Na WMokeR.
	Kandy	R. TDI	bed 2940Cun	MingRf IA	50261
	Name	Address	City		Zip
		•		IA	
	Name	Address	City		Zip
	~	 .		IA	
	Name	Address	City		Zip
		(CHECK ONE BOX PER FORM		
i (we	e) in compliance with the provision	ns of Chapter 547, Code c	of lowa, hereby establish or amend Tra	de Name as follows:	
	Establish Trade Name			clocation	1 Agent
		,	Name of Business	10 7	
	2940 (umming	Name of Business Road Vav pplete Business Address (Required)	Mcter,	1A 5026/
	Dissolve Trade Name	Com	piete business Address (Required)		1
	Original Book	Page			
	Add/Withdrawal name(s) of P	artner(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 foregot	ng list who owns or has any interest in	the above named busine	ess. I (we) further certify that a
corre	ected statement will be filed in the	future each time there m	by be any change in ownership, as pro		
1	Sandy! K. 1	A OPR X	ingly laber	Date Signed:	2/17
	Printed Name		46ignature		
	Printed Name	x <u>/</u>	Signature	Date Signed:	
	Fillited Name	,	Olgriature		
	Printed Name	x	Signature	Date Signed:	
0.1		1	he said JUSTOW P	14 2) 6 1 6 4 1	
this		worn to before me by the 201	ne said <u>Vertices in the said of the said </u>		
1	T (N)		Notary Public in and for Mad	C COLDINA	, 10.0()
ΧĹ	Junomi	i	inotary Public in and for 11100	COUNTY	$\alpha, \underline{\omega}$.
		SIN IFEETE			
		2 Commission	ALDRIDGE Number 768383 Ission Expires		
		My Commi	ission Expires		