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LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

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Tradename

Type of Document

PREPARER INFORMATION: (name, address, phone number)

Sarah Wagner 3211 Peru 12d Thuro, 14 50257 515-493-9362

TAXPAYER INFORMATION: (name and mailing address)

RETURN DOCUMENT TO: (name and mailing address)

Sarah Wagner 3211 Peru Rd Truro, 1A 50257

GRANTOR: (name)

GRANTEE: (name)

Sarah Wagner

The Virtual Sarah

LEGAL DESCRIPTION: (if applicable)

See page:

Document or instrument of associated documents previously recorded:

(if applicable)

Verified statements of person or co-partnership conducting a business of FIOWA, MADISON COUNTY. Names of Person(s) Owning or Having Interest in the Business: SAVAN WAGNER 3211 PERWED Name Address Name Address *CHECK ON I (yee) in compliance with the provisions of Chapter 547, Code of Iowa, her Establish Trade Name The Virtual Saviness 3211 Persuerd The Virtual Saviness	City City NE BOX PER FORM* reby establish or amend Trade Nam.	IA 50 25 Zip IA Zip IA Zip JA Zip
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Establish Trade Name The Virtual Son 3211 Peru Rd Thuro,		
3211 Peru Rd Truro,	arah	e as follows:
3211 Peru Rd Truro,		
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Dissolve Trade Name		
Original BookPage		
Add/Withdrawal name(s) of Partner(s)		
Name of Business	Original Book	Page
Change of Address Business / Home (Circle One)	Complete Address	
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And that there is no one except those mentioned in the foregoing list who corrected statement will be filed in the future each time there may be any Surah Mane x Printed Name Signat	change in ownership, as provided by Date S	ve named business. I (we) further certify the y Section 547.2, Code of lowa.
x	Date S	igned:
Printed Name : Signat	ure	
X Printed Name X	Date S	igned:
Subscribed in my presence and sworn to before me by the said this 9th day of Way	Heather of ablic in and for POIK	Snell country, Toular.