

new Information

BUSINESS INFORMATION

Name of Applicant Mironenko Brothers INC.
(must be individual, partners of a partnership or corporation)

Trade Name, if applicable Good Old Movers.

Physical Address 23801. nw. 1st Ave. Ridgefield. WA. 98642

Mailing Address same.

Telephone Number (360) 936-5937 Fax Number (360) 887-3129

UBI #: 602 813 062 Email: goodoldmovers@msn.com

TYPE OF BUSINESS STRUCTURE

Individual Partnership Corporation Other INC. S
(LP, LLP, LLC)

List the name, title and percentage of partner's share or stock distribution for major stockholders:

<u>Name</u>	<u>Title</u>	<u>Stock Distribution or Percentage of Shares</u>
<u>Yury. Y. Mironenko</u>	<u>President / owner</u>	<u>75%</u>
<u>Aleksei. Y. Mironenko</u>	<u>Vice President / owner</u>	<u>25%</u>

Choose one of the following for the territory in which you wish to operate:

- All counties in the State of Washington
- The following named counties only: _____

Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: _____

Briefly describe your experience in the transportation/household goods moving industry:

operated since 2005

Old Information

BUSINESS INFORMATION

Name of Applicant Yury Aleksei Mironenko
(must be individual, partners of a partnership or corporation)

Trade Name, if applicable Good Old Movers

Physical Address 23801. NW 1st Ave Ridgefield. WA. 98642

Mailing Address same.

Telephone Number (360) 936-5937 Fax Number (360) 887-3129

UBI #: 602 471 403 Email: Good Old Movers @ MSN.COM.

TYPE OF BUSINESS STRUCTURE

- Individual
 Partnership
 Corporation (LP, LLP, LLC)
 Other _____

List the name, title and percentage of partner's share or stock distribution for major stockholders:

<u>Name</u>	<u>Title</u>	<u>Stock Distribution or Percentage of Shares</u>
<u>Yury. Y. Mironenko</u>	<u>owner</u>	<u>50%</u>
<u>Aleksei. Y. Mironenko</u>	<u>owner</u>	<u>50%</u>

Choose one of the following for the territory in which you wish to operate:

- All counties in the State of Washington
- The following named counties only: _____

Describe the services you wish to provide. Explain how your services will enhance customer choice, promote competition, or fill an unmet need for service: _____

Briefly describe your experience in the transportation/household goods moving industry:

operated since 2005

ATTACHMENT D

**CHANGE OF CORPORATE/INDIVIDUAL NAME
(WAC 480-15-400)**

This application is for name change only and must not involve a change in ownership, management, or control of the household goods operating authority.

A company must file a name change application to:

- Change a corporation's name
- Change an individual's name
(may be sole proprietor or individual in a partnership)
- Change or add a trade name

NOTE: You may not advertise to operate under the changed name until a permit is issued in the new name.

Current Name on Permit: Yury & Aleksei Mironenko.

Current Trade Name on Permit: Good Old Movers.

Address: 23801. NW. 1st Ave. Ridgefield. WA. 98642

Phone Number: (360) 936-5937 Fax Number: (360) 887-3129

Email Address: Goodoldmovers@MSN.COM

If a corporation, list names, titles, stock distribution or major stockholders under the current name:

I request the name on household goods permit HG- 61841 be changed to:

New Name: Mironenko Brothers INC UBI Number: 602 813 062

New Trade Name (if applicable): Good Old Movers

Address (if changed) _____

If a corporation, list names, titles, stock distribution or major stockholders under the current name:

<u>Yury. Y. Mironenko</u>	<u>President/owner</u>	<u>75%</u>
<u>Aleksei. Y. Mironenko</u>	<u>Vice President/owner</u>	<u>25%</u>

I certify that this information is true and correct, that I am authorized to execute and file this document on behalf of the applicant and that all information is current and valid.

[Signature] President
Signature and Title of Applicant

3-21-08 Ridgefield. WA.
Date and Location

FAX

To: U.T.C.

From: Mary

Pages: 5

PROFESSIONAL, EXPERIENCED, FAMILY OWNED & OPERATED QUALITY MOVERS.



GOOD MOVERS

MURYMIRONENKO

LICENSED - INSURED

TEL: 360-936-5937
FAX: 360-887-3129