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5662 0002/008

, NUC	Holder of Permit CC-040574 asks t	he UTC for authority to change the
, ,	menof and the business structure of the car	rier named below, pursuant to the
NASH.	provisions of 81.80 RCW and WAC 480-1	4 to:
	NEW BUSINESS I	NEODMATION
!	NEW BUSINESS I	
	New Name: Commercial Grading Inc	Phone #: 509 926 - 3094
	Trade Nature: Communical Fracting Live	Fax #: 509 926 4877
Ī	Mailing Address:	Physical Address: (if different) E 21510 Helburk
	Street/P.O. Box Otis Onchards	Street OLL Onchards
	City, State Zip WA 99027-0001	City, State Zip WA 99027
	USDOT # 103 49 62 www.jmcsa.dot.gov/online-registration or contact 360-596-	(If you don't have one, you can apply online at 3816 or 360-596-3803 for assistance.
	Unified Business Identifier Number (UBI): 60	1758176
	☐ Individual ☐ Partnership Corporation (LP, LLP, LLC)	- State of Incorporation WASh
	NAME PALENT ZOUW Print	PERCENTANGE OF SHARES
	Physics Toyer Dec Vice Dres	10 10
1 1	0 0	
10	CURRENT BUSINES	SSINFORMATION CC_46574
[کر (Commercia Drading Inc	2 Dobert & Byer may 80
605	Commercial Goding Inc	Phone #: 509 926 3094
6	Trade Name:	509 926 4877
	Mailing Address:	Physical Address: Helbert
	Street/P.O. Box Olis On Chards	Olis Onchards
	City, State Zip	City, State Zip 057 -200 /
	□ Individual □ Partnership Corporation	
	NAME Palet Sour Pris	PERCENTANGE OF SHARES
	Physica June Ser	39 1-20-41
Pall /	Sohn Joseph Verl Pr	
2Mh		



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AUG 13 200)

WASH. UT. & TP. COMM

1300 South Evergreen Park Drive SW

PO Box 47250
Olympia, WA 98504-7250
Phone (360) 664-1222
Fax (360) 586-1181
Web Site: www.wutc.wa.goy

TV-091290

COMMON CARRIER OF PROPERTY

(excluding Household Goods carriers and Brokers)

APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE FEE: \$50.00

Application for Change of Name or Business Structure circumstances:	cture may be used <u>ONLY</u> in the following
 business when the individual is the majori partnership, when the individual is the majority shareholder majority partner. Change of name resulting from a change is corporation established to incorporate the majority stockholders in the same proportion. Change of name resulting from a change is change of name resulting from a change in the same proportion. 	ual to corporation to incorporate an individual's ty stockholder or, by an individual to a jority partner or, from a corporation to a or, by a partnership to a proprietorship of the n business structure from a partnership to a partnership business, when the partners are the onate ownership.
Francisco de Estado de Est	
TYPE OF P	AYMENT
Credit Card Information (if applicable)	MasterCard Visa Exp Date Month/Year ME:CommetCult rading like
COMPANY NA CERTIFICATION: I, the undersigned, under penalty information is true and correct, that I am authorized to applicant, and that all information on file is current and the correct are considered.	for false statement, certify that the following execute and file this document on behalf of the
Cardholder's signature:	Date
Companies Van Only	
For Commission Use Only 111-2068-200-02 50.00 Received date:	ID 5662
	In surance:
0019211	

CV+15304

Form E

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CC40574

MC 1633a (Ed. 8-99) UNIFORM INFORMATION SERVICES, INC.

UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

AUG 17 2000

IRB 3539B

0040374	(Executed in	Triplicate)	_	1 2009
Filed with.WashingtonUti.	lities. & Transportatio	onComm(hereinafte	r called Commisside) U	T. & TP. COMM
This is to certify, that theAmer	ican Hallmark Insurand	ce Company of Te	xas 50	الرقاه
(hereinafter called Company) of777	Main Street, Ste 1000	Fort Worth, TX Home Office Address of Company)	76102	nding
has issued to Commercial Grad	ing Inc of Motor Carrier)	f PO Box 1, Otis	Orchards, WA (Address of Motor Carrier)	paper U
a policy or policies of insurance effective policies and continuing until cancelled as Liability Insurance Endorsement, has or h obligations imposed upon such motor ca regulations promulgated in accordance th	s provided herein, which, by attach ave been amended to provide autor urrier by the provisions of the moto	ment of the Uniform Motor mobile bodily injury and pro	r Carrier Bodily Injury an operty damage liability ins	d Proberty Damage urance covering the
Whenever requested, the Comparthereon.	ny agrees to furnish the Commission	on a duplicate original of	said policy or policies ar	nd all endorsements
This certificate and the endorsem- cancellation may be effected by the Com- notice to commence to run from the date) days' notice in writing to	on of the policy to which the State Commission, s	it is attached. Such uch thirty (30) days'
Countersigned at777 Main Str. (Street Ad			(State)	(Zip Code)
this11th	ıgust 20 09		XIO()	
Insurance Company File No44CL43	0815 (Policy Number)		authorized Company Representat	ive)