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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.gov

COMMON CARRIER OF PROPERTY

14112214

(excluding Household Goods carriers and Brokers)

APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE

	FEE: \$50.00	
Application for Change of Name of	or Business Structure may be us	ed ONLY in the following
circumstances:		
 Changes of carrier's name. Change of business structure business when the individual partnership, when the individual partnership of the major majority partner. Change of name resulting a corporation established to a series. 	with no change in ownership of the from individual to corporation and is the majority stockholder of vidual is the majority partner or, rity shareholder or, by a partners from a change in business struct incorporate the partnership busine same proportionate ownership	on to incorporate an individual's or, by an individual to a from a corporation to a skip to a proprietorship of the ture from a partnership to a ness, when the partners are the
	from a change in business struct	
	both corporations are wholly ov	
in the same proportions.	16.6	•
	TYPE OF PAYMENT	
□ Cash □ Check □ . Credit Card Information (if applicable)		□ MasterCard □ Visa Exp Date Month/Year
	COMPANY NAME: Marihy	•
CERTIFICATION: I, the undersigne information is true and correct, that I applicant, and that all information on	am authorized to execute and file t	this document on behalf of the
Cardholder's signature:	-Mudd	Date_12-23-11
For Commission Use Only		6777
	Received date: 12-28-11	ID: 036962
* 3434		Insurance:

TV-(12214

Holder of Permit CC-46581 asks the UTC for authority to change the name of or			
the business structure of the carrier named below under 81.80 RCW and WAC 480-14 to:			
NEW BUSINESS INFORMATION			
New Name: Marihuan Enterprises Inc Phone #: 4/25 - 238 - 9324			
Trade Name:	Fax #:		
Mailing Address: P.D. Box 428	Physical Address: (if different) 233 314 AVENE		
Street/P.O. Box	Street		
City, State Zip Arlington, WA 98223	City, State Zip Arlungton, WA 98223		
USDOT # (If you don't have one, you can apply online at www.fmcsa.dot.gov/online-registration or contact 360-596-3816 or 360-596-3803 for assistance.			
in a symbol de la servicio del servicio del servicio de la servicio della servici			
Unified Business Identifier Number (UBI):			
☐ Individual ☐ Partnership ☑ Corporation — State of Incorporation			
NAME TITLE PERCENTANGE OF SHARES			
Robert Maximugh Dwner 100			
CURRENT BUSINESS INFORMATION			
Current Name: Robert Marihuan	Phone #: 425 238-9324		
Trade Name: Marihuah Laggung	Fax #:		
Mailing Address:	Physical Address:		
Street/P.O. Box P.D. Box 428	Street 28433 3rd AVR NE		
City, State Zip Arlungton WA 982	23 City, State Zip Anlungton, WA 98223		
Individual Partnership Corporation — State of Incorporation			
NAME TITLE OWNE	PERCENTANGE OF SHARES		
PODERT MUNILIGIA DANIER 100			

CERTIFICATION: Carrier affirms that the change of name or business structure does not involve a change in ownership, management, or control of the operating authority. The undersigned applicant requests that the Commission enter an order granting its petition as provided in 81.80 RCW.

I certify or declare under penalty of perjury under the laws of the State of Washington that the information contained in this application is true and correct.

Let M 12-23-11
Signature(s)

Date