

JD#20757

621 Woodland Square Loop SE Lacey, WA 98503 P.O. Box 47250 Olympia, WA 98504-7250 Phone: 360-664-1222

Email: transportation@utc.wa.gov

HOUSEHOLD GOODS MOVING COMPANY - NAME CHANGE (WAC 480-15-400)

FILING YOUR APPLICATION

This application is for name change only and *does not* involve a change in ownership, management, or control of the household goods operating authority. You *may not* advertise to operate under the changed name until a permit is issued in the new name. A company must file a name change application to:

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

For timely processing of this application, the following should be complete prior to applying:

Update desired change with the Department of Revenue
Update desired change with the Office of the Secretary of the State
Update desired change with the FMCSA

The commission has a policy of providing equal access to its services. If you need special accommodations, please call 360-664-1243 or The Washington Relay Service at 7-1-1 or 1-800-833-8384.

Select one of the following:

- Scan/PDF your application to efileapp.utc.wa.gov and pay online at payments.utc.wa.gov
- Mail your application with your check or money order to the following address: UTC, PO Box 47250, Olympia, WA 98504-7250

ACH on-line (no service fee) or credit card on-line at payments.utc.wa.gov (2.5% or minimum of \$3.95 is charged by Official Payments for credit card processing).

DO NOT EMAIL YOUR CREDIT CARD INFORMATION

	FOR OFFICAL USE ONL	LY
Date Filed: 6/9/2021	Company: Job4Movers, LLC	Docket #:
Receipt ID: 71250	Payment ID:	Amount Paid: \$35
111-0268-207-02	111-0268-032-20	

Fee
\$35
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	Section 1 - BUSINESS INFORMATIO	N	
Current Legal Name on Permit:	le got it local	mover LLC.	400
Current Trade Name, (d/b/a) if Applic	cable:		
Household Goods Permit #: (T)HG -	068844		
Physical Address:		. nerstalio, micros com co	
Mailing Address: 940 N 63	rd Stapt 103 Show	Cine, WA 9813	3
Telephone Number: 425-43		ob4 moverss@gn	nai
Current Contact Name: Than)	
USDOT#: 33 04 220			
Business License/UBI#: 604 3	85 845 604-385-045		
	Type of Business		
Individual Partnership Co	orporation Other (LP, LLP, LLC)	State of Incorporatio	n
List the name, title and percentage o	f all partner's share or stock distribu	ution for major stockholders:	150
Name	Title	Stock Distribution/% of Shar	es
Juan J. Gutierret	Owner	100	
I request that the name on househo	old goods permit (T)HG - 0688	44 be changed to:	
New Company Name: 108	YMOVERS LLC	The second secon	
New Trade Name(s) (d/b/a):			
		100,000	
I certify that this information is true	and correct, that I am authorized t	o execute and file this docum	ent
behalf of the applicant and that all i	information is current and valid.		
tuan f. Gutierre Name and Title of Applicant	2 Operator	01/20/21	
Name and Title of Applicant		Date	