

WASHINGTON



UTILITIES AND TRANSPORTATION COMMISSION

1300 South Evergreen Park Drive SW
PO Box 47250
Olympia, WA 98504-7250
Phone 360-664-1222
Fax 360-586-1181
Web Site: www.utc.wa.gov
transportation@utc.wa.gov

COMMON CARRIER OF PROPERTY
(Excluding Household Goods Carriers and Brokers)

APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE

Per WAC 480-14-210

FEE: \$50.00

For Official Use Only		ID: <u>U680</u>
111-0268-200-02	Received Date: <u>2/11/15</u>	Docket TV- <u>150712</u>
Receipt ID:	Payment ID:	Insurance:

Application for Change of Name or Business Structure may be used ONLY in the following circumstances:

- Carrier changes registered name, with no change in ownership or business structure.
- The carrier changes its business structure:
 - a. From an individual to a corporation or limited liability company (LLC), when the individual is the majority stockholder.
 - b. From an individual to a partnership, when the individual is the majority partner.
 - c. From a corporation or LLC to a sole proprietorship of the majority shareholder.
 - d. From a partnership to a sole proprietorship of the majority partner.
- Carrier changes from partnership to a corporation or LLC when the partners are the majority stockholders in the same proportionate ownership.
- Carrier changes from a corporation or LLC to another corporation or LLC where both corporations or LLC's are wholly owned by the same stockholders in the same proportions.

Holder of Permit CC-61759 asks the UTC for authority to change the name of its business or the business structure of the carrier named below under RCW 81.80 and WAC 480-14 to:

New Business Information

New Legal Name: Northshore Trucking, INC Phone: 360-319-9706
 Trade Name: Northshore Land & Travel Fax #: N/A
 Mailing Address: 5645 Lind Rd Physical address (if different):
 Street/PO Box: _____ Street: _____
 City, State Zip Deming WA 98244 City, State, Zip _____
 Unified Business Identifier Number (UBI): 603-447-720
 Email address: 3BSRanch@gmail.com USDOT number: 1819432

Type of Business Structure:

Individual Partnership Limited Liability Company Corporation State of Inc. _____

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>PERCENTAGE OF SHARES</u>
Jason Jacoby	President	5645 Lind Rd Deming wa 98244	/ 50%
Heidi Jacoby	Secretary	5645 Lind Rd Deming wa 98244	/ 50%

Current Business Information

Current Legal Name: ~~Northshore Trucking, INC~~ ^{Jason Jacoby} Phone: 360-319-9706

Trade Name: _____ Fax #: N/A

Mailing Address: 5645 Lind Rd Physical address: (if different): _____

Street/PO Box: _____ Street: _____

City, State Zip: Deming WA 98244 City, State, Zip: _____

Individual Partnership Limited Liability Company Corporation State of Inc. _____

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>	<u>PERCENTAGE OF SHARES</u>
JASON JACOBY	PRESIDENT	5645 LIND RD DEMING WA 98244	/ 50%
HEIDI JACOBY	SECRETARY	5645 LIND RD DEMING WA 98244	/ 50%

Certification: I, the undersigned, 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 transfer CC- 61759 as provided in RCW 81.80.

I, the undersigned, under penalty for false statement, certify that the information contained in this application is true and correct, and that I am authorized to execute and file this document on behalf of the applicant.

Heidi Jacoby
Signature

02/19/15
Date

Form E
Uniform Motor Carrier Bodily Injury and Property Damage
Liability Certificate of Insurance (Executed in quadruplicate)



FARMERS

Filed with Washington Utilities and Transportation Commission
(Name of Commission)

This is to certify, that the MID-CENTURY INSURANCE COMPANY
(Name of Company)

(herein called Company) of 4680 WILSHIRE BLVD., LOS ANGELES, CA 90010
(Home Office, Address of Company)

has issued to NORTH SHORE TRUCKING, INC
(Name of Motor Carrier)

of 5645 LIND RD DEMING WA 98244-9205
(Address of Motor Carrier)

a policy or policies of insurance effective from 03/18/2015, 12:01 a.m. standard time at the address of the insured stated in said policy or policies and continuing until canceled as provided herein, which, by attachment of the uniform motor carrier bodily injury and property damage liability insurance endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the commission has jurisdiction or regulation promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be effect by the Company or the insured giving thirty (30) days' notice in writing to the State commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the commission.

Countersigned at 23175 NW BENNETT ST., HILLSBORO, OR 97124
(Street Address) (City) (State) (ZIP Code)

this 19 day of MARCH, year 2015.

Insurance Company File No. 60504-78-11
(Policy No.)

Batman Dukes
Authorized Company Representative

This form determined by the National Association of Regulatory Utility Commissioners and promulgated by the Interstate Commerce Commission pursuant to the provisions of Section 202(b)(2) of the Interstate Commerce Act (49 U.S.C., sec.302(b)(2)).