Skamania County, WA Total:\$0.00 NAME Pgs=2

2021-001346

04/19/2021 04:08 PM

Request of: SKAMANIA COUNTY DISTRICT COURT



RETURN ADDRESS:

SKAMANIA COUNTY DISTRICT COURT 240 VANCOUVER AVE. P.O. BOX 790 STEVENSON, WASHINGTON 98648

PLEASE PRINT OR TYPE INFORMATION:

Document Title(s) or transactions contained therein:			
1. Case #, ORDER CHANGING NAME			
GRANTOR(S), LAST NAME, FIRST NAME AND INITIALS.			
1. OLD NAME, UNIS SAFAR DAOODI			
GRANTEE(S), LAST NAME, FIRST NAME AND INITIALS.			
1. NEW NAME, <u>CHRISTIAN ODIN DAOODI</u> .			

STATE OF WASHINGTON | SS
COUNTY OF SKAMANIA | SS
I, ISA County Clerk of the District Court of Skamania County, Washington, DO HEREBY CERTIFY that this instrument, consisting of pages(s), is a true and correct copy of the original now on file and of record in my office and, as clerk, I am the legal custodian, thereof. Signed at Stevenson Washington April 191, 2021

FILED

APR 19 2021

SKAMANIA COUNTY DISTRICT COURT

District Court Clerk		STEVENSON, WA	
District Court For Skamania County	of Washington	No. N21-00002	
In the Matter of the Change of Nan	ne of:	ORDER CHANGING NAME (Adult)	
UNIS SAFAR DAOODI			
(Legally Print or Type Full Name Here)	Petitioner	. 0	
I.BASIS A verified Petition was filed with the Court requesting that the name of:			
UNIȘ	SAFAR	DAOODI	
First:	Middle:	Last:	
TO:			
CHRISTIAN First:	ODIN Middle:	DAOODI Last:	
Based on the case record to date and the testimony at the hearing, if any, the Court finds: The Statements in the petition are true. The Request to change names is not made for any illegal or fraudulent purpose. The change of name will not be detrimental to the interests of any other person. The request to change names should be granted. Other:			
t is hereby ordered that the name:	III. ORDER		
UNIS	SAFAR	DAOODI	
First:	Middle:	Last:	
s changed to:		ŕ	
CHRISTIAN First:	ODIN Middle:	DAOODI Last:	
Date: 4/19/2011	Jı	udge:	