Skamania County, WA NO FEE NAME Pgs=3

2023-001260

09/05/2023 01:53 PM

Request of: SKAMANIA COUNTY DISTRICT COURT

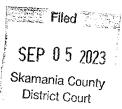


RETURN ADDRESS:

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 #_ N23-00011, ORDER CHANGING NAME				
GRANTOR(S), LAST NAME, FIRST NAME AND INITIALS				
OLD NAME, Madison Isabella Seuell				
GRANTEE(S), LAST NAME, FIRST NAME AND INITIALS.				
NEW NAME, Madison Isabelle Kellems				



District Court of Washington For Skamania County			No. N23-00011		
In the Matter of the Change of Name of:			ORDER CHANGING NAME (Adult)		
Madison Isabella Seuell					
(Legally Print or Type Full Name Here)					
	Petitioner				
	I.BAS	is			
A verified Petition was filed with the	Court requesting that the	e name of:			
Madison	Isabella	Se	uell		
First:	Middle:	Las	et:		
TO:	- N. J		4.		
Madison	Isabella	Ke	llems		
First:	Middle:	Las			
	II. FINDIN	ee d			
Based on the case record to date an The Statements in the petition a The Request to change names The change of name will not be The request to change names s Other:	are true. is not made for any ille detrimental to the inter	gal or fraudulent pu	irpose.		
	III. ORDE	R			
It is hereby ordered that the name:					
Madison	Isabella	Se	uell		
First:	Middle:	Las	t:		
Is changed to:					
Madison	Isabella	Ke	llems		
First:	Middle:	Vagras Las	ton of the		
For all purposes.		off to your and the	the country of the assets to complete and the country of the asset of the country		
Date: $9/5/2023$.		Judge:	2/2		



State of Washington
County of Skamania
I, MANY COLONIC Clerk of the District Court
of Skamania County, Washington, DO HEREBY
CERTIFY that this instrument, consisting of
page(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
District Court Clerk