

ASSUMED BUSINESS OR PROFESSIONAL NAME CERTIFICATE

(D.B.A. – Doing Business As)

STATE OF TEXAS

COUNTY OF GARZA

PURSUANT TO THE PROVISIONS OF CHAPTER 71 OF THE BUSINESS AND COMMERCE CODE OF THE STATE OF TEXAS, THE UNDERSIGNED CERTIFIES THE FOLLOWING:

ASSUMED NAME:

BUSINESS ADDRESS:

CITY:

STATE:

ZIP:

The business or professional service conducted or rendered under this assumed name is being or will be conducted or rendered as indicated below: (Check one)

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> General Partnership |
| <input type="checkbox"/> Business Corporation | <input type="checkbox"/> Limited Partnership |
| <input type="checkbox"/> Registered Limited Liability Partnership | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other _____ | |

This certificate shall be effective for a term not to exceed ten (10) years from the date the certificate is filed.

I/We, the undersigned, are the owner(s) of the above business and my/our name(s) and address(es) given is/are true and correct and there is/are no ownership(s) in said business other than those listed herein below.

| |
|--|
| Name _____ Signature _____ (Printed Name) |
| Residence Address _____, City _____, ST ____ Zip _____ |

| |
|--|
| Name _____ Signature _____ (Printed Name) |
| Residence Address _____, City _____, ST ____ Zip _____ |

| |
|--|
| Name _____ Signature _____ (Printed Name) |
| Residence Address _____, City _____, ST ____ Zip _____ |

Sworn to and subscribed to before me this the _____ day of _____, 20____.
(SEAL)

NOTARY PUBLIC, STATE OF TEXAS