

ASSUMED NAME CERTIFICATE (NON-STATE FILED BUSINESS)

NOTICE: THE FILING OF THIS BUSINESS NAME IS VALID ONLY FOR A PERIOD NOT TO EXCEED 10 YEARS

NAME IN WHICH BUSINESS IS OR WILL BE CONDUCTED _____

BUSINESS ADDRESS _____

CITY _____

STATE _____

ZIP _____

BUSINESS IS A (CHECK ONE)

SOLE PROPRIETORSHIP

GENERAL PARTNERSHIP

UNINCORPORATED NONPROFIT ASSOCIATION

I/WE, THE UNDERSIGNED, ARE THE OWNER(S) OF THE ABOVE BUSINESS AND MY/OUR NAMES(S) AND ADDRESS GIVEN IS/ARE TRUE AND CORRECT, AND THERE IS/ARE NO OWNERSHIP(S) IN SAID BUSINESS OTHER THAN LISTED BELOW.

NAME _____

SIGNATURE _____

RESIDENTIAL ADDRESS _____

CITY _____

STATE _____

ZIP _____

NAME _____

SIGNATURE _____

RESIDENTIAL ADDRESS _____

CITY _____

STATE _____

ZIP _____

NAME _____

SIGNATURE _____

RESIDENTIAL ADDRESS _____

CITY _____

STATE _____

ZIP _____

BEFORE ME, THE UNDERSIGNED AUTHORITY, ON THIS DAY PERSONALLY APPEARED

KNOWN TO ME TO BE THE PERSON(S) WHOSE NAME(S) IS/ARE SUBSCRIBED TO THE FOREGOING INSTRUMENT AND ACKNOWLEDGED TO ME THAT HE/SHE/THEY SIGNED THE SAME FOR THE PURPOSE AND CONSIDERATION THEREIN EXPRESSED.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS THE _____ DAY OF _____, 20_____.

Signature of Notary _____

STATE OF TEXAS, COUNTY OF _____