

ASSUMED NAME CERTIFICATE FOR AN INCORPORATED BUSINESS OR PROFESSION

NAME UNDER WHICH BUSINESS OR PROFESSIONAL SERVICES IS OR WILL BE CONDUCTED

Name: _____
Address: _____
City: _____

1. The name of the incorporated business or profession as stated in its Articles of incorporation or comparable document is:

_____ and the charter number or certificate of authority number, if any, is: _____

2. The state, country, or other jurisdiction under the laws of which it was incorporated is: _____ and the address of its registered or similar office in that jurisdiction is: _____.

3. The period, not to exceed ten years, during which this assumed name will be used is: _____ (Certificates are valid for a period not to exceed 10 years from the date)

4. The corporation is a (circle one) business corporation, non-profit corporation, professional corporation, professional association or other type of corporation (specify):

5. If the corporation is required to maintain a registered office in Texas, the address of the registered office is: _____, and the name of its registered agent at such address is: _____

The address of the principal office (if not the same as the registered office) is: _____

6. If the corporation is not required to or does not maintain a registered office in Texas, the office address in Texas is: _____ and if the corporation is not incorporated, organized or associated under the laws of Texas the address of its place of business in Texas is: _____ and the office address elsewhere is: _____

7. The county or counties where business or professional services are being or are to be conducted or rendered under such assumed name are (if applicable, use the designation "all" or "all except").

8. If this instrument is executed by the attorney-in-fact, the attorney-in-fact hereby states that he has been duly authorized, in writing, by his principal to execute and acknowledge this instrument.

Signature of Officer, Representative or
Attorney-in-fact of the corporation

STATE OF TEXAS

COUNTY OF _____

This instrument was acknowledged before me on the _____ day of _____, 20____, by _____, the _____ on behalf of said corporation or association.

Notary Public, State of Texas

Printed Name of Notary

My Commission expires: _____

INSTRUCTIONS FOR FILING ASSUMED NAME CERTIFICATE

1. An incorporated business or profession doing business under a name other than its corporate name as stated in its articles of incorporation must file an assumed name certificate with the Secretary of State and with the appropriate County Clerk in accordance with Section 36.11 of the Texas Business and Commerce Code.
2. The information provided in paragraph 6 as regards the registered agent and registered office address in Texas must match the information on file in this office. To verify the information on file with this office, you may contact our corporate information unit at (512) 463-5555. Forms to change the registered agent/office are available from this office should you require to update this information.
3. For purposes of filing with the Secretary of State, the corporation should submit an originally executed assumed name certificate accompanied by the filing fee of \$25.00 to:

**Secretary of State
Statutory Filings Division
Corporations Section
P.O. Box 13697
Austin, Texas 78711-3697
(512) 463-5582**

4. The filing fee with the Secretary of state is \$25.00.
5. All assumed name certificates to be filed with the County Clerk must be forwarded the Corporation directly to the County Clerk.
6. Whenever an event occurs that causes the information in the assumed name certificate to become materially misleading (eg. change of registered agent/office or change of name), a new certificate must be filed within 60 days after the occurrence of the events which necessitate the filing.