ASSUMED NAME CERTIFICATE FOR AN INCORPORATED BUSINESS OR PROFESSION

NOTICE: "CERTIFICATES" ARE VALID NOT TO EXCEED 10 YEARS FROM THE DATE FILED IN THE COUNTY CLERK'S OFFICE CHAPTER 71, SECT. 151(a), TITLE 5 BUSINESS AND COMMERCE CODE THIS CERTIFICATE PROPERLY EXECUTED IS TO BE FILED IMMEDIATELY WITH THE COUNTY CLERK

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

| | (Print or Type) | |
|--|--|--|
| Address: | | |
| City: | State: | Zip Code: |
| . The name of the incorporated busines | s or profession as stated in its Articles of | f Incorporation or comparable document is: |
| • | n under the laws of which it was incorpord the address of its registered or similar | orated is r office in that jurisdiction is: |
| The side of the supposition record of | uring which this assumed name will be | nsed is: |
| 4. The corporation is a (circle one) busin | | rofessional corporation, professional association |
| 5. If the corporation is required to maint | | ress of the registered office is |
| the name of its registered agent at such | address is | , The address of |
| he principal office (if not the same as the | ne registered office) is: | |
| . • | and if the corpor | n Texas, the office address in Texas is: |
| inder the laws of Texas, the address its | place of business in Texas is: | and the office |
| | , | |
| | | re to be conducted or rendered under such |
| · · · · · · · · · · · · · · · · · · · | | |
| If this instrument is executed by the a writing, by his principal to execute and | attorney-in-fact, the attorney-in-fact here acknowledge this instrument. | eby states that he has been duly authorized, in |
| | | Signature Corp. Officer, representative or attorney-in-fact of the corporation |
| Known to me to be the person(s) whose | AUTHORITY, on this day personally an name(s) is/are the subscribed to the for purpose and consideration therein expr | egoing instrument and, under oath, acknowled |
| | | |
| GIVEN UNDER MY HAND AND SE. | AL OF OFFICE, on: | . ,20 |
| | • | |
| | | |
| · | | |
| | | |
| | • | |
| | Notary P | ublic |