

**ASSUMED NAME RECORD (D/B/A)**  
CERTIFICATE OF OWNERSHIP FOR BUSINESS OR PROFESSION

NAME UNDER WHICH BUSINESS IS TO BE CONDUCTED: \_\_\_\_\_

NATURE OF BUSINESS: \_\_\_\_\_

PHYSICAL BUSINESS ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

MAILING ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

TIME PERIOD BUSINESS NAME WILL BE USED (not to exceed 10) \_\_\_\_\_ YEAR(S).

CERTIFICATE OF OWNERSHIP

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 are no other owners in said business.

PRINT OR TYPE NAME (Signature(s) must be signed in front of a Notary)

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

THE STATE OF TEXAS

COUNTY OF \_\_\_\_\_

Before me the undersigned authority, on this day personally appeared \_\_\_\_\_

Those person(s) whose name(s) are listed above known to me to be the person(s) subscribed to the foregoing instrument and acknowledged to me that they are the owner(s) of the above named business and that they signed the same for the purpose and consideration herein explained.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_

(SEAL)

\_\_\_\_\_  
Signature of Notary Public