

ASSUMED NAME CERTIFICATE

FOR AN UNINCORPORATED BUSINESS OR PROFESSION OTHER THAN A LIMITED PARTNERSHIP, REGISTERED LIMITED LIABILITY PARTNERSHIP, OR LIMITED LIABILITY COMPANY.



HEIDI EASLEY
COUNTY CLERK, VICTORIA COUNTY
115 N. BRIDGE ST. RM. 103, VICTORIA, TEXAS 77901
PHONE: 361-575-1478

NAME IN WHICH BUSINESS IS OR WILL BE CONDUCTED:

(Print or type name of business)

BUSINESS ADDRESS: _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

(If different than business address)

PERIOD (not to exceed 10 years) DURING WHICH NAME WILL BE USED: _____ THRU _____

BUSINESS TO BE CONDUCTED AS (CHECK WHICH ONE):

Sole Proprietorship Sole Practitioner General Partnership

Real Estate Investment Joint Stock Company

Other form of unincorporated business or professional association or entity other than limited partnership, a limited liability company or registered limited liability company or registered limited liability partnership (Specify Below): _____

PRINT OR TYPE NAME OR OWNER(S). NOTE: SIGNATURE(S) MUST BE SIGNED IN FRONT OF A NOTARY

NAME: _____ SIGNATURE: _____

ADDRESS: _____

NAME: _____ SIGNATURE: _____

ADDRESS: _____

NAME: _____ SIGNATURE: _____

ADDRESS: _____

NAME: _____ SIGNATURE: _____

ADDRESS: _____

THE STATE OF TEXAS }

COUNTY OF VICTORIA }

Before me, the undersigned authority, on this day personally appeared _____

_____ those person(s) whose name(s) are listed above known to me to be 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 expressed.

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

(SEAL)

Notary Public/ Clerk County Court

County, Texas

By: _____ Deputy