

**STATEMENT OF ABANDONMENT OF USE OF A
BUSINESS OR PROFESSIONAL NAME**

1. The assumed business or professional name being abandoned is: _____

2. The original date on which the assumed name certificate was filed in the office in which this state-
ment is being filed was: _____

Other filing offices, where the certificate has been filed: _____

3. The Registrant's name and residence address and office address as would be required to be stated
if the assumed name certificate were being presently filed is: _____

To certify which, witness _____ hand(s) the _____ day of _____, 19__

THE STATE OF TEXAS }
COUNTY OF GRAYSON }

Before me, _____

_____ in and for said County and State,
on this day personally appeared _____

known to me to be the person(s) whose name _____ subscribed to the foregoing certificate, and
acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office, this _____ day of _____, 19__.

Notary Public, State of Texas

My Commission Expires _____