ASSUMED NAME RECORDS CERTIFICATE OF OWNERSHIP FOR UNINCORPORATED BUSINESS OR PROFESSION

NOTICE: "CERTIFICATES OF OWNERSHIP" ARE VALID ONLY FOR A PERIOD NOT TO EXCEED 10 YEARS FROM THE DATE FILED IN THE OFFICE OF THE COUNTY CLERK (Chapter 36 Sec.1 Title 4- Business and Commerce Code)

(This certificate, properly executed, is to be filed immediately with the County Clerk)

NAME IN WHICH BUSINESS IS OR WILL BE CONDUCTED:

(Please print or type name of Business)			
BUSINESS ADDRESS:			
CITY:ST	ATE:	ZIP:	
PERIOD (Not to exceed 10 years) DURING W		. BE USED:	
BUSINESS IS TO BE CONDUCTED AS (Check One):	:		
Sole Proprietorship	Sole Practitioner		Joint Venture
General Partnership	Limited Partnership		Joint Stock Company
Real Estate Investment Trust	Other (Name Type):		
CERTI	FICATE OF OWNERSHIP		
I/We, the undersigned, are the owner(s) of the a			
and correct, and there is/are no ow		n iisred herei	i below:
Print Name			
ADDRESS:		ZII	P:
Residence			
NAME:	SIGNATURE:		
Print Name			
ADDRESS:		ZII	P:
Residence			
NAME:	SIGNATURE:		
Print Name			
ADDRESS: Residence		ZI	P:
	KNOWLEDGEMENT		
STATE OF TEXAS, COUNTY OF			
This instrument was acknowledged before me on t	 theday	of	20,
for			
Name of Owners			
Notary Stamp:	Signature of Note	ary Public, Si	rate of Texas
	Printed Name of	Notary	
	Commission Exp	ires:	