

ABANDONMENT OF ASSUMED NAME CERTIFICATE

ASSUMED BUSINESS OR PROFESSIONAL NAME BEING ABANDONED:

(Please type or Print)

File Date of Original Certificate: _____

File Number of Original Certificate: _____

NAME AND ADDRESS(ES) OF OWNER/REGISTRANT ABANDONING THE BUSINESS:

Name: _____

Personal Address: _____

Signature: _____

(Please DO NOT SIGN until you are in front of a Notary)

Name: _____

Personal Address: _____

Signature: _____

(Please DO NOT SIGN until you are in front of a Notary)

Name: _____

Personal Address: _____

Signature: _____

(Please DO NOT SIGN until you are in front of a Notary)

EXECUTED on this the _____ day of _____, 20____ by the above-signed representatives.

ACKNOWLEDGEMENT

STATE OF TEXAS)

)

COUNTY of _____)

This instrument was acknowledged before me by _____

this the _____ day of _____, 20_____.

My Commission Expires:

NOTARY PUBLIC, STATE OF TEXAS

(Please Print or Type Name)