

**NON-STATE ASSUMED NAME CERTIFICATE
FOR AN UNINCORPORATED BUSINESS OR PROFESSION**
CERTIFICADO DE NOBRE ASUMIDO DE NEGOCIO NO ARCHIVADO EN EL ESTADO

NOTICE: THE FILING OF THIS BUSINESS NAME IS VALID ONLY FOR A PERIOD NOT TO EXCEED 10 YEARS
AVISO: EL NOMBRE DE ESTE NEGOCIO NO EXCEEDERA 10 AÑOS
(Chapter 36, Title 4 Business and Commerce Code)

NAME IN WHICH BUSINESS IS OR WILL BE CONDUCTED *NOMBRE EN EL CUAL EL NEGOCIO ES O SERA CONDUCTIDO*

BUSINESS ADDRESS *DIRRECCION COMERICAL*

CITY *CIUDAD*

STATE *ESTADO*

ZIP *CODIGO POSTAL*

Business is to be conducted as (Check one):

- SOLE PROPRIETORSHIP**
- GENERAL PARTNERSHIP**
- LIMITED PARTNERSHIP**
- JOINT VENTURE**
- OTHER (name type)** _____

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 IS/ARE NO OWNERSHIP(S) IN SAID BUSINESS OTHER THAN LISTED HEREIN BELOW.

YO/NOSOTROS, EL/LOS SUBSCRITO(S), SOY/SOMOS EL/LOS DUEÑO/S DEL NEGOCIO ANTES MENCIONADO Y MI/NUESTROS NOMBRE(S) Y LA DIRECCION MENCIONADA ES/SON VERDADERO(S) Y CORRECTOS, Y NO HAY SOCIOS EN EL NEGOCIO DICHO CON EXCEPCION DE EL/LOS YA MENCIONADO(S).

NAME *NOMBRE*

SIGNATURE *FIRMA*

RESIDENTIAL ADDRESS *DOMICILIO RESIDENCIAL*

CITY *CIUDAD*

STATE *ESTADO*

ZIP *CODIGO POSTAL*

NAME *NOMBRE*

SIGNATURE *FIRMA*

RESIDENTIAL ADDRESS *DOMICILIO RESIDENCIAL*

CITY *CIUDAD*

STATE *ESTADO*

ZIP *CODIGO POSTAL*

NAME *NOMBRE*

SIGNATURE *FIRMA*

RESIDENTIAL ADDRESS *DOMICILIO RESIDENCIAL*

CITY *CIUDAD*

STATE *ESTADO*

ZIP *CODIGO POSTAL*

NOTARY USE ONLY

STATE OF TEXAS

COUNTY OF _____

BEFORE ME, THE UNDERSIGNED AUTHORITY, ON THIS DAY PERSONALLY APPEARED

KNOWN TO ME TO BE THE PERSON(S) WHOSE NAME(S) IS/ARE SUBSCRIBED TO THE FOREGOING INSTRUMENT AND ACKNOWLEDGE TO ME THAT HE/SHE/THEY SIGNED THE SAME FOR THE PURPOSE AND CONSIDERATION THEREIN EXPRESSED.

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

(SEAL)

SIGNATURE OF NOTARY