

**ASSUMED NAME CERTIFICATE
FOR AN INCORPORATED BUSINESS OR PROFESSION**

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

Name under which business or professional services is or will be conducted:

Address: _____

City: _____ State: _____ ZipCode: _____

1. The name of the incorporated business or profession as stated in its Articles or Incorporation or comparable document is: _____, and the charter number or certificate of authority number, if any is: _____.

2. The state, country, or other jurisdiction under the laws of which it was incorporated is: _____, and the address of its registered or similar office in that jurisdiction is: _____

3. The period, not to exceed ten years, during which the assumed name will be used is: _____

4. The corporation is a (circle one) business corporation, non-profit corporation, professional corporation, professional association or other type of corporation (specify) _____, or other type of incorporated business, professional or other association or legal entity (specify) _____

5. If the corporation is required to maintain a registered office in Texas, the address of the registered office is: _____, and the name of its registered agent at such address is: _____. The address of the principal office (if not the same as the registered office) is: _____.

6. If the corporation is not required to or does not maintain a registered office in Texas, the office address in Texas is: _____ and if the corporation is not incorporated, organized or associated under the laws of Texas, the address of its place of business in Texas is: _____ and he office address elsewhere is: _____.

7. The county or counties where business or professional services are being or are to be conducted or rendered under such assumed name are (if applicable, use the designation "all" or "all except") _____.

8. If this instrument is executed by the attorney-in-fact hereby states that he has been duly authorized, in writing, by his principal to execute and acknowledge this instrument.

By: _____
Signature of officer, attorney-in-fact or representative of the corporation

Printed Name: _____

Title: _____

THE STATE OF TEXAS }

COUNTY OF HOOD }

Before me, the undersigned authority on this day personally appeared

known to me to be the person whose name is/are subscribed to the foregoing instrument and acknowledged to me that he is/are the owner of the above named business and that he signed the same for the purpose and consideration therein expressed.

Given under my hand and seal of office, this ____ day of _____, 20____.

Printed Name of Notary or County Clerk

Signature of Notary or Deputy Clerk