

**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 COUNTY CLERK'S OFFICE.
(Chapter 36, Sec. 1, Title 4 – Business and Commerce Code)

NAME IN WHICH BUSINESS IS OR WILL BE CONDUCTED

PHYSICAL ADDRESS OF BUSINESS _____

CITY: _____ STATE: _____ ZIP CODE: _____

PERIOD (not to exceed 10 years) DURING WHICH ASSUMED NAME WILL BE USED: _____

BUSINESS IS TO BE CONDUCTED AS (check one):

Individual General Partnership Limited Partnership
 Other (name type) _____

CERTIFICATE OF OWNERSHIP

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 those listed herein below.

NAMES OF OWNERS

NAME _____ **SIGNATURE** _____
(print or type)

ADDRESS _____ **ZIPCODE** _____

NAME _____ **SIGNATURE** _____
(print or type)

ADDRESS _____ **ZIPCODE** _____

NAME _____ **SIGNATURE** _____
(print or type)

ADDRESS _____ **ZIPCODE** _____

THE STATE OF TEXAS

COUNTY OF DENTON

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 acknowledged to me that ___he___ is/are the owner(s) 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, on _____,

(seal)

Notary Public in and for State of Texas

CYNTHIA MITCHELL, DENTON COUNTY CLERK

By: _____, Deputy