

ASSUMED NAME CERTIFICATE FOR AN INCORPORATED BUSINESS OR PROFESSION

NAME UNDER WHICH BUSINESS OR PROFESSIONAL SERVICES IS OR WILL BE CONDUCTED

Name: _____
Address: _____
City: _____

1. The name of the incorporated business or profession as stated in its Articles of 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 this assumed name will be used is: _____ (Certificates are valid for a period not to exceed 10 years from the date)

4. The corporation is a (circle one) business corporation, non-profit corporation, professional corporation, professional association or other type of corporation (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 the 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, the attorney-in-fact hereby states that he has been duly authorized, in writing, by his principal to execute and acknowledge this instrument.

Signature of Officer, Representative or Attorney-in-fact of the corporation

STATE OF TEXAS
COUNTY OF _____
This instrument was acknowledged before me on the _____ day of _____, 20____, by _____, the _____ on behalf of said corporation or association.

Notary Public, State of Texas

Printed Name of Notary
My Commission expires: _____