STONEWALL COUNTY

CERTIFICATE OF OWNERSHIP OF A 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) BUSINESS 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:_____// from date filed BUSINESS IS TO BE CONDUCTED AS (check one): Individual General Partnership Limited Partnership Other: 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. MUST BE SIGNED IN FRONT OF NOTARY. NAME(S) OF OWNER(S) SIGNATURE_____ NAME (print or type) ADDRESS (CITY, STATE, ZIP) (MAILING ADDRESS) SIGNATURE____ NAME (print or type) ADDRESS (CITY, STATE, ZIP) (MAILING ADDRESS) _____SIGNATURE_____ NAME_ (print or type) ADDRESS (CITY, STATE, ZIP) (MAILING ADDRESS) THE STATE OF TEXAS COUNTY OF STONEWALL 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 mentioned named business and that he signed the same for the purpose and consideration therein expressed.

Given under my hand and Seal of Office on _____

Notary Public in and for the State of Texas.