

**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.

(See Chapter 71 of the Texas Business and Commerce Code for other requirements and additional information)

**NAME IN WHICH BUSINESS IS, OR IS TO BE, CONDUCTED:**

PHYSICAL ADDRESS OF BUSINESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

Expiration date of the Assumed Name : \_\_\_\_\_

BUSINESS IS TO BE CONDUCTED AS (check one):

Individual                       General 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 \_\_\_\_\_

ADDRESS \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_

**THE STATE OF TEXAS**

**COUNTY OF BEE**

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 \_\_\_\_\_, \_\_\_\_\_

Notary Public in and for State of Texas

**NICKELLE GONZALEZ, Bee County Clerk**

By: \_\_\_\_\_, Deputy