



Assumed Name Records

Certificate of Ownership for Unincorporated Business or Profession

Name in which business will be conducted: _____

Business address: _____

This business will be conducted as: Proprietorship General Partnership
 Limited Partnership Other _____

Period during which assumed name will be used: 10 YEARS

I/WE, the undersigned am/are the owner(s) of the above business and my/our name and address given is/are true and correct, and there is/are no other ownership(s) in said business other than those listed below.

Signature _____ Name _____
Address _____

Signature _____ Name _____
Address _____

Signature _____ Name _____
Address _____

Signature _____ Name _____
Address _____

Signature _____ Name _____
Address _____

Signature _____ Name _____
Address _____

State of Texas
County of Bell

BEFORE ME, the Undersigned Authority, on this day personally appeared the above named individual(s) known to me to be the person(s) whose name(s) is/are subscribed to the forgoing instrument and acknowledged to me that he/she/they are the owner(s) of the above named business and that he/she/they signed the same for the propose and consideration therein expressed.

Given under my hand and seal of office on _____.

(SEAL)

Notary Public, State of Texas