



POLK COUNTY, TEXAS

**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)

(This certificate properly executed is to be filed immediately with the County Clerk)

NAME IN WHICH BUSINESS IS OR WILL BE CONDUCTED

(PRINT OR TYPE)
BUSINESS ADDRESS _____

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)

- | | | |
|---|--|--|
| <input type="checkbox"/> Proprietorship | <input type="checkbox"/> Sole Practitioner | <input type="checkbox"/> Joint Venture |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Joint Stock Company |
| <input type="checkbox"/> Real Estate Investment Trust | <input type="checkbox"/> Other (name/type) _____ | |

CERTIFICATE OF OWNERSHIP

I/We, the undersigned, are the owner__ of the above business and my/our name__ and address__ given is/are true and correct, and there is/are no ownership(s) in said business other than those listed herein below.

Name _____ Signature _____

Address _____ Zip Code _____
(Residence)

Name _____ Signature _____

Address _____ Zip Code _____
(Residence)

Name _____ Signature _____

Address _____ Zip Code _____
(Residence)

Name _____ Signature _____

Address _____ Zip Code _____
(Residence)

Name _____ Signature _____

Address _____ Zip Code _____
(Residence)

(Acknowledgment)

STATE OF TEXAS
COUNTY OF POLK

This instrument was acknowledged before me on the _____ day of _____ 20____

By _____

My commission expires:

Notary Public, State of Texas
Notary's printed name