

**STATEMENT OF ABANDONMENT OF
A BUSINESS OR PROFESSIONAL NAME**

1. The assumed business or professional name being abandoned is:

2. The original date on which the assumed name certificate was filed in the office in which this statement is being filed was:

Other filing offices, where the certificate has been filed:

3. The Registrant's name and residence address and office address as would be required to be stated if the assumed name certificate were being presently filed is:

To certify which, witness ____ hand(s) the ____ day of _____

(Signed, withdrawing party or parties)

STATE OF TEXAS
COUNTY OF POLK

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

By: _____

Notary Public, State of Texas
OR/BY
SCHELANA HOCK, POLK COUNTY CLERK

By: _____, Deputy