**Donna M VanWay**

**Live Oak County Clerk**

**Assumed Name Records**

**Certificate Of Ownership-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 & Commerce Code for other requirements and additional information)

**Assumed Business Name**/ **Nombre Comercial Asumido** (Please Print Legibly/*Por Favor* *imprima de forma legible)*

**□ Business Address (Physical)/ Direccion de la Empresa**

*Check box if return address here or below/ La casilla si la dirección del remitente está aquí o abajo*

□ **Business Postal Address (if different from above)** *Dirección postal comercial (si es diferente de la anterior)*

**Business Structure-Business or Professional Service is or will be conducted as:**

 **□Sole Proprietorship □General Partnership □Unincorporated Nonprofit Association**

 **Propiedad de Sun Sociedad Colectiva Asociación sin fines de lucro no incorporada**

*(HB3609\*Limited Partnership, Limited liability partnership, Limited Liability Co or Foreign Filing entity to be filed with Secretary of State)*

*(HB3609\*Sociedad limitada, Sociedad de responsabilidad limitada, compañía de responsabilidad limitada o entidad de presentación extranjera que se presentara ante el Secretario de estado)*

**Certificate of Ownership**

The undersigned certifies that there is no ownership in said business other than those listed herein below. If the undersigned is acting in the capacity of an attorney-in-fact for the entity, the undersigned certifies that the entity has duly authorized the undersigned in writing to execute this document.

*El abajo firmante certifica que no existe propiedad en dicho negocio más allá de los que se enumeran a continuación. Si el abajo firmante actúa en calidad de apoderado de la entidad, el abajo firmante certifica que la entidad ha autorizado debidamente al abajo firmante por escrito para ejecutar este documento.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (Please Print) *(en letra de imprenta)* Signature *Firma*

□ Residence Address/ *Direccion de residencia*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (Please Print) *Nombre (en letra de imprenta)* Signature *Firma*

□ Residence Address/ *Direccion de residencia*

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**For Use by Notary** – The State of Texas and County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Before me, the undersigned authority on this day personally appeared: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, known to me or provided to me to be the person(s) whose name is subscribed to the foregoing instrument and acknowledged to me that he/she/ they executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Seal)

Notary Signature