



STACEY KEMP, COUNTY CLERK

COLLIN COUNTY, TEXAS
2300 Bloomdale Road, Suite 2106
McKinney Texas 75071

ASSUMED NAME CERTIFICATE OF OWNERSHIP FOR INCORPORATED BUSINESS OR PROFESSION

Name of Business or Professional Service: _____
Print or Type

Business address: _____
Print or Type City State Zip Code

Name of Incorporated Business or Profession as stated in its articles of incorporation:

Print or Type

Certificate number: _____ State in which business was incorporated: _____

Address of registered office in that jurisdiction:

Print or Type City State Zip Code

Name of registered agent: _____
Print or Type

Corporation type: (please check one)
_____ Business Corporation _____ Professional Corporation _____ Limited Liability Company
_____ Non Profit Corporation _____ Other (please specify) _____

The period during which the assumed name will be used is _____ years. (Pursuant to Title 5, Chapter 71.151(a) of the Texas Business and Commerce Code, Certificates of Ownership are valid for a period not to exceed 10 years from date certificate is filed).

County or counties where business or professional services are being conducted:

Print or Type

If this instrument is executed by the attorney-in-fact, he/she has been duly authorized in writing by his/her principal to execute and acknowledge this instrument:

Name and title of officer or Attorney-in-fact Print or Type

Signature

THE STATE OF TEXAS }
COUNTY OF COLLIN }

BEFORE ME, THE UNDERSIGNED AUTHORITY, on this day personally appeared _____, known to me to be the person(s) whose name subscribed to the foregoing instrument, and acknowledged to me that he/she/they executed the same for the purpose therein expressed.

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

(SEAL)

Printed Name of Notary or County Clerk

Signature of Notary or Deputy Clerk