

ASSUMED NAME RECORD (D.B.A.)

CERTIFICATE OF OWNERSHIP FOR UNINCORPORATED BUSINESS OR PROFESSION

NAME IN WHICH BUSINESS IS OR WILL BE CONDUCTED: _____

BUSINESS ADDRESS:

_____	_____
Physical Address	Mailing Address
_____	_____
City/State/Zip Code	City/State/Zip Code

BUSINESS IS TO BE CONDUCTED AS (CHECK ONE): _____ **SOLE PROPRIETORSHIP** OR _____ **OTHER**
OTHER: _____

(General Partnership, Joint Venture, Joint Stock Company, Sole Practitioner, Real Estate Investment Trust, Limited Partnership, Professional Association/Entity, Or Other Form of Unincorporated Business)

COUNTY WITHIN THE STATE OF TEXAS WHERE THE BUSINESS OR PROFESSION SERVICE WILL BE RENDERED:
MADISON COUNTY

THE PERIOD, NOT TO EXCEED 10 YEARS, DURING WHICH THE ASSUMED NAME WILL BE USED:
FROM: _____ **TO:** _____

CERTIFICATE OF OWNERSHIP

I/We the undersigned, are the owner(s) of the above business and my/our name(s) and address given is/are true and correct and there is/are no other owners in said business.

****** TO BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC ******

NAME: _____	_____
Signature	Mailing Address
_____	_____
Printed Name	City/State/Zip Code

NAME: _____	_____
Signature	Mailing Address
_____	_____
Printed Name	City/State/Zip Code

NAME: _____	_____
Signature	Mailing Address
_____	_____
Printed Name	City/State/Zip Code

THE STATE OF TEXAS
COUNTY OF MADISON

BEFORE ME on this _____ day of _____, 20_____, personally appeared _____ and acknowledged to me that he/she/they executed the foregoing certificate for the purpose and consideration herein expressed.

(SEAL)

Notary Public in and for the State of Texas

THE STATE OF TEXAS
COUNTY OF MADISON

BEFORE ME on this _____ day of _____, 20_____, personally appeared _____ and acknowledged to me that he/she/they executed the foregoing certificate for the purpose and consideration herein expressed.

(SEAL)

Notary Public in and for the State of Texas