



**BECKY IVEY
JOHNSON COUNTY CLERK
ASSUMED NAME RECORDS**

2 N. Main St. Room B15
Cleburne TX 76033
817-202-4000 x 1625



Certificate of Ownership-Unincorporated Business or Profession
Chapter 71 – Texas Business & Commerce Code

Assumed Business Name *(Please Print Legibly)*

Business Address Number & Street City State Zip
Check box of return address here or below

Business Postal Address *(if different from above)* City State Zip

Assumed Name will be used for the maximum 10 years unless indicated here: _____

Business Structure - Business or Professional Service is or will be conducted as: (circle one)

Sole Proprietorship General Partnership Sole Practitioner Joint Stock Co.
Estate Real Estate Investment Trust Other (Name Type) _____

(This form not for use if business structure is LP, LLC, LLP or foreign filing entity—use incorporated form)

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.

Name *(Please Print)* Signature

Residence Address City State Zip

Name Signature

Residence Address City State Zip

Name Signature

Residence Address City State Zip

For Use by Notary - The State of Texas and County of Johnson

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

_____, known to me or proved 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