

Dana DeBeauvoir Travis County Clerk

Phone: (512) 854-9188 www.traviscountyclerk.org Mailing Address: P.O. Box 149325, Austin, Texas 78714-9325

Recording, Elections, Computer Resources, Accounting, and Administration Divisions

Misdemeanor Records, Civil/Probate/Commissioners Court Minutes, and Records Management Divisions

5501 Airport Boulevard, Austin, Texas 78751 1000 Guadalupe, Austin, Texas 78701

ASSUMED NAME CERTIFICATE FOR CERTAIN UNINCORPORATED PERSONS

ASSUMED NAME under which the business or professional service is or is to be conducted (print clearly):

PHYSICAL ADDRESS OF BUSINESS (print clearly):		
Address		
City S	tate	Zip Code
I hereby state that this registrant is:		•
AN INDIVIDUAL. Below is my full name and residence address.		
A PARTNERSHIP. Below is the name and office address of the venture or partrand each joint venturer's or general partner's office address, if the venture or part		
AN ESTATE. Below is the name and address (if any) of the estate; the full name residence address if the representative is an individual, or the representative's off		
☐ A REAL ESTATE INVESTMENT TRUST. Below is the name and address of trustee manager's residence address, if the trustee manager is an individual, or th not an individual.		
COMPANY OTHER THAN A REAL ESTATE INVESTMENT TRUST. Bel country, or other jurisdiction under the laws of which this company was organize		
And further state that this registrant is not a limited partnership, limited liability compa	ny, limited lia	bility partnership, or foreign filing entity.
Information required as listed above (print clearly):		
Name Signature		
Address		
Name Signature		
Address		
Name Signature		
Address		
FOR USE BY NOTARY AND CLERK OF THE COURT, DEPUTY. The State of Texas ar	ıd County of T	Travis:
Before me, the undersigned authority, on this day personally appeared:known to me to be the person(s) whose name(s) is/are subscribed to the foregoing instrusame purpose and consideration therein expressed. Given under my hand and seal of of	ıment and ack	cnowledged to me that he/she/they signed the
Signature of Notary Public in and for the State of Texas or Clerk of the Court, Deputy	Seal of the	Notary Public or Clerk of the Court, Deputy
INFORMATION WHERE DOCUMENT SHOULD BE RETURNED (to be completed by applicant): In the spaces below, clearly print the name, address, city, state, and zip code where this document should be returned		
	Form of ide	entification presented: