

**STATEMENT OF ABANDONMENT OF USE OF A
BUSINESS OR PROFESSIONAL NAME**

1. The assumed business or professional name being abandoned is: _____

2. The date on which the assumed name certificate was filed in the office in which this statement is being filed was: _____

Other filing offices, if any, where the certificate has been filed: _____

3. The Registrant's name and residence or office address as would be required to be stated if the assumed name certificate were being presently filed is: _____

To certify which, witness _____ hand the _____ day of _____, 20____.

THE STATE OF TEXAS }}

COUNTY OF _____ }}

Before me, the undersigned authority, on this day personally appeared _____
_____,
known to me to be the person _____ whose name _____ subscribed to the foregoing
instrument, and acknowledged to me that _____ he _____ executed the same for the purposes and
consideration therein expressed.

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

No _____

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**STATEMENT OF ABANDONMENT
OF USE OF A BUSINESS OR
PROFESSIONAL NAME**

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Name _____

Address _____

=====

Filed for Record this the _____

day of _____

20_____, at _____ o'clock, ___M.

Eva S. Martinez, County Clerk

By: _____ Deputy Clerk
