

**CERTIFICATE OF ABANDONMENT OF USE OF
ASSUMED BUSINESS OR PROFESSIONAL NAME**
CERTIFICADO DE ABANDONO AL USO DEL NEGOCIO ASUMIDO O NOMBRE PROFESIONAL

1. **THE ASSUMED BUSINESS OR PROFESSIONAL NAME BEING ABANDONED IS** *(EL NEGOCIO ASUMIDO O NOMBRE PROFESIONAL ES):*

2. **THE DATE ON WHICH THE CERTIFICATE OF ASSUMED NAME WAS FILED ON** *(LA FECHA EN QUE EL CERTIFICADO DEL NOMBRE ASUMIDO FUE):*

3. **OTHER FILING OFFICE OR OFFICES, IF ANY** *(OTRA/S OFICINA/S ARCHIVADAS SI APLICABLE):*

4. **NAME AND ADDRESS OF REGISTRANT(S)** *(NOMBRE Y DOMICILIO DE/LOS REGISTRADO/S):*

NAME *NOMBRE*

SIGNATURE *FIRMA*

TITLE *TITULO*

ADDRESS *DOMICILIO*

NAME *NOMBRE*

SIGNATURE *FIRMA*

TITLE *TITULO*

ADDRESS *DOMICILIO*

NAME *NOMBRE*

SIGNATURE *FIRMA*

TITLE *TITULO*

ADDRESS *DOMICILIO*

NOTARY USE ONLY

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 INSTRUMENT AND ACKNOWLEDGE TO ME THAT HE/SHE/THEY SIGNED THE SAME FOR THE PURPOSE AND CONSIDERATION THEREIN EXPRESSED.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS THE _____ DAY OF _____, 20_____.

SIGNATURE OF NOTARY

STATE OF TEXAS – COUNTY OF _____