

**CERTIFICATE OF ABANDONMENT OF USE OF
ASSUMED BUSINESS OR PROFESSIONAL NAME**

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

2. The filing information (i.e. volume and page and/or CFN) for the assumed business or professional name being abandoned:

3. Name and address of registrant(s):

Name Address

Title

Name Address

Title

Name Address

Title

Name Address

Title

EXECUTED this 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(s) whose name(s) are 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 the _____ day of _____, 20____.

Notary Public, STATE OF TEXAS