



DWIGHT D. SULLIVAN, COUNTY CLERK
GALVESTON COUNTY, TEXAS

ASSUMED NAME CERTIFICATE FOR INCORPORATED BUSINESS OR PROFESSION

NOTICE: "CERTIFICATES OF OWNERSHIP" ARE VALID ONLY FOR A PERIOD NOT TO EXCEED 10 YEARS FROM THE DATE FILED IN THE COUNTY CLERK'S OFFICE (CHAPTER 71.151(a) - BUSINESS AND COMMERCE CODE) THIS CERTIFICATE, PROPERLY EXECUTED, IS TO BE FILED IMMEDIATELY WITH THE COUNTY CLERK.

NAME IN WHICH BUSINESS OR PROFESSIONAL SERVICES IS OR WILL BE CONDUCTED (Print or Type)

Address: City: State: Zip Code:

1. Name of the incorporated business or profession as stated in its Articles of Incorporation or comparable document is: and the CHARTER NUMBER or CERTIFICATE OF AUTHORITY NUMBER, if any, is:

2. The state, country or other jurisdiction under the laws of which it was incorporated is: and the address of its registered or similar office in that jurisdiction is:

3. The period, not to exceed ten years, during which this assumed name will be used is:

4. The corporation is a (Check one):

- Business Corporation Non-profit Corporation Professional Association Professional Corporation Other:

5. If the corporation is required to maintain a registered office in Texas, the address of the registered office is: and the name of its REGISTERED AGENT at such address is: The address of the principal office (if not the same as the registered office) is:

6. If the corporation is not required to or does not maintain a registered office in Texas, the office address in Texas is: and if the corporation is not incorporated, organized or associated under the laws of Texas, the address of its place of business in Texas is: and the office address elsewhere is:

7. The county or counties where business or professional services are being or are to be conducted or rendered under such assumed name are (must file in each county if doing business as such) :

8. If this instrument is executed by the attorney-in-fact, the attorney-in-fact hereby states that he/she has been duly authorized in writing, by his/her principal to execute and acknowledge this instrument.

Name of Corporation:

By: Title: (Signature of officer, representative or attorney-in-fact)

The State of Texas, County of Galveston

BEFORE ME, THE UNDERSIGNED AUTHORITY, on this day personally appeared Known to me to be the person whose name is subscribed to the foregoing instrument and, under oath, acknowledged to me that he/she signed the same for the purpose and consideration therein expressed.

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

DWIGHT D. SULLIVAN, COUNTY CLERK GALVESTON COUNTY, TEXAS

By: , or Deputy

Notary Public