

STATEMENT OF ABANDONMENT OF USE OF A BUSINESS OR PROFESSIONAL NAME

Check one: _____ Complete _____ Partial

**TATE OF TEXAS
COUNTY OF WALKER**

This is to certify, on this _____ day of _____, 201_____, that I,
_____ Of Walker County Texas has abandoned the assumed or professional name
which is currently filed as:

PHYSICAL ADDRESS OF BUSINESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

NAME _____ <small>(Print or type)</small>	SIGNATURE _____
ADDRESS _____	ZIPCODE _____
NAME _____ <small>(Print or type)</small>	SIGNATURE _____
ADDRESS _____	ZIPCODE _____
NAME _____ <small>(Print or type)</small>	SIGNATURE _____
ADDRESS _____	ZIPCODE _____

This certificate has been made in compliance with the provisions of Section 36.14 V.T.C.A. Business and Commerce Code, requiring same to be made when withdrawing of disposing of interest in a firm doing business under an assumed name.

**ACKNOWLEDGEMENT:
THE STATE OF TEXAS COUNTY OF WALKER**

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 acknowledged
to me that he/she signed the same for the purpose and consideration therein expressed.

GIVEN UNDERER MY HAND AND SEAL OF OFFICE, this _____ day of _____, 201____

Notary Public in and for State of Texas

Kari A. French, Walker County Clerk
BY: _____ Deputy

County Clerk Validation