

ASSUMED NAME RECORDS



CHAMBERS COUNTY TEXAS

STATEMENT OF ABANDONMENT OF USE OF A BUSINESS OR PROFESSIONAL NAME FOR UNINCORPORATED BUSINESS OR PROFESSION

- 1. **The Assumed Business or Professional Name being abandoned is:**

- 2. **The Original Certificate Number on file is:**

- 3. **The date on which the Assumed Name Certificate was filed:**

- 4. **The Applicant's name and residence or office address as shown on the Assumed Name Certificate:**

NAME _____ TITLE _____

RESIDENCE OR MAILING ADDRESS _____
(CITY, STATE, ZIP)

NAME _____ TITLE _____

RESIDENCE OR MAILING ADDRESS _____
(CITY, STATE, ZIP)

NAME _____ TITLE _____

RESIDENCE OR MAILING ADDRESS _____
(CITY, STATE, ZIP)

WARNING: INTENTIONALLY PROVIDING FALSE OR FRAUDULENT INFORMATION ON THIS APPLICATION IS A VIOLATION OF THE LAW AND MAY RESULT IN IMPRISONMENT OF NOT MORE THAN 5 YEARS AND/OR FINE OF UP TO \$10,000 (TX. Business & Commerce Code §71.203; TX. Penal Code § 37.10). By signing below, the applicant(s) acknowledge understanding of and compliance with the statutes cited.

Printed Name of Owner

Signature of Owner

Printed Name of Owner

Signature of Owner

Printed Name of Owner

Signature of Owner

THE STATE OF _____
COUNTY OF _____

BEFORE ME, THE UNDERSIGNED AUTHORITY, on this day personally appeared _____.

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

GIVEN UNDER MY HAND AND SEAL OF OFFICE, on _____, 20_____.

Notary/County Clerk/Deputy County Clerk Signature
(Seal below)