STATEMENT OF ABANDONMENT OF USE OF A BUSINESS OR PROFESSIONAL NAME

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

__________________________________________

2. The date on which the assumed name certificate was filed in the office in which this statement is being filed was:

__________________________________________

3. The Registrant’s name and residence or office address as would be required to be stated if the assumed name certificate were being presently filed is:

__________________________________________

TO CERTIFY WHICH, witness my/our hand(s) the ______ day of ________________
20____.

(Signature of owner)

(Printed name)

(Signature of owner)

(Printed name)

THE STATE OF TEXAS  }
COUNTY OF BASTROP  }

BEFORE ME, the undersigned Notary Public, in and for said County and State, on this day personally appeared __________, known to me to be the person whose name(s) is/are subscribed to the foregoing instrument, and acknowledged to me that he/she/they executed the same for purposes therein expressed.

GIVEN UNDER MY HAND and seal of office, this ______ day of ________________
20____.

(Signature of Notary Public)

(Printed Name of Notary)

(My Commission Expires)

(Below this line is for County Clerk’s File Stamp)