

**STATEMENT OF ABANDONMENT  
OF ASSUMED NAME**

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

\_\_\_\_\_

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

\_\_\_\_\_

3. Registrant's name and residence address:

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_

THE STATE OF TEXAS  
COUNTY OF JIM WELLS

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   is/are the owner(s) of the above-name business and that   he   signed the same for the purpose and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, on \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public in and for State of Texas

(seal)