

WITHDRAWAL NOTICE OF ASSUMED NAME

NOTICE:
THIS CERTIFICATE OF WITHDRAWAL WHEN PROPERLY
EXECUTED IS TO BE FILED IMMEDIATELY WITH THE COUNTY CLERK.

NAME OF BUSINESS BEING ABANDONED: _____

BUSINESS ADDRESS _____

CITY _____ STATE _____ ZIP _____

Give date original assumed name was filed in this office _____

Name other filing offices, if any, where you filed the same assumed name _____

Each of the undersigned has this day withdrawn from or disposed of his/her interest in the above mentioned business and is no longer connected with the same, and will not be responsible for debts contracted by said business after the filing of this Withdrawal Notice as prescribed by law.

-NAMES OF OWNERS-	
NAME _____ <small>(print or type)</small>	SIGNATURE _____
Residence Address _____	
City: _____	State: _____ Zip: _____
NAME _____ <small>(print or type)</small>	SIGNATURE _____
Residence Address _____	
City: _____	State: _____ Zip: _____
NAME _____ <small>(print or type)</small>	SIGNATURE _____
Residence Address _____	
City: _____	State: _____ Zip: _____
NAME _____ <small>(print or type)</small>	SIGNATURE _____
Residence Address _____	
City: _____	State: _____ Zip: _____

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

THE STATE OF TEXAS §
COUNTY OF HARRIS §

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

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

(Seal)

Deputy County Clerk /Notary Public in and for the State of Texas