



ASSUMED NAME CERTIFICATE

THE STATE OF §
 § KNOW ALL MEN BY THESE PRESENT:
 COUNTY OF §

That _____,
 a corporation, of _____, State of _____, is the true
 name of the corporation conducting a business in the State of Texas, under the assumed name of:

which is an assumed name and the true or real full name of the corporation conducting said business and
 the Post Office address is as follows:

This certificate is made in compliance with the provisions of Chapter 428, Page 984, Acts 1961,
 57th Legislature, Regular Session, requiring said certificate to be made by those persons conducting a
 business under an ASSUMED NAME.

Witness the execution hereof this the _____ day of _____, _____.

ATTEST: _____
 (Fill in Name of Corporation)

 BY:
 It's President

CORPORATION ACKNOWLEDGMENT

THE STATE OF §
 §
 COUNTY OF §

BEFORE ME, the undersigned, a Notary Public in and for said County and State, on this day
 personally appeared _____, known to me to be the
 person and officer whose name is subscribed to the foregoing instrument and acknowledged to me that
 the same was the act of the said _____,
 a corporation, and that he/she executed the same as the act of such corporation for the purposes and
 consideration therein expressed, and in the capacity therein stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the _____ day of _____,
 20 _____.

 Notary Public in and for _____ County,
 State of _____
 Commission expires _____