

**OFFICE OF THE SECRETARY OF STATE**

**BUSINESS OPPORTUNITY  
EXEMPTION NOTICE**

The following product/package franchisor claims an exemption under Bus. & Com. Code, Sec. 51.003(b)(8):

1) \_\_\_\_\_  
Name of Franchisor

2) \_\_\_\_\_  
Name(s) Under Which Franchisor Intends To Do Business

3) \_\_\_\_\_  
Franchisor's Principal Business Address

Franchisor: \_\_\_\_\_

Signed by: \_\_\_\_\_

Title: \_\_\_\_\_

Date signed: \_\_\_\_\_

**INSTRUCTIONS**

1. Print or type when filling out this form.
2. Be sure and fill in all of the blanks.
3. If any of the blanks are not completed the form will be returned to the remitter.
4. If the franchise will be doing business under more than one name, list the other name(s) for our reference.
5. The filing fee is \$25. Make checks payable to the Secretary of State. The form will be returned if the \$25 filing fee is omitted.
6. The completed form and filing fee should be sent to:

Secretary of State  
Statutory Documents Section  
P. O. Box 13550  
Austin, TX 78711-3550

7. The Exemption Statement will be effective as of the date of receipt in the Secretary of State's Office and the receipt of the proper filing fee.
8. This is a one-time filing and as such does not require an annual filing. If the franchisor's principal address changes, however, then notify our office of the change by sending in a letter with the new address. No fee is required.
9. If an acknowledgement of receipt of this filing is desired enclose a copy of the exemption statement along with the original and a self-addressed stamped envelope and the copy will be date stamped and returned.

If you have any questions concerning this form, you may contact this office at (512) 475-1769.