

ELIZABETH PEREZ, COUNTY CLERK
FALLS COUNTY, TEXAS
P O BOX 458, 125 BRIDGE ST, ROOM 202
MARLIN, TX. 76661
PHONE: (254) 883-1408

Assumed Name (DBA) Certificate

Name of Business or Professional Service _____
Print or Type

Physical Business Address _____
Print or Type City State Zip

The period during which the assumed name will be used is 10 years. (Pursuant to Title 5, Chapter 71.151(a).

The Business or Professional Service under this Assumed name will be conducted as a (check one)

☐ Sole Proprietorship ☐ Corporation
☐ Joint Venture ☐ Other (name type) _____
☐ General Partnership

I/We, the undersigned, am/are the owners(s) of the above listed business and my/our names(s) and address(es) given is/are true and correct and there is/are no ownership(s) in said business other than those listed below.

Name: _____ Signature _____
Print or Type

Address: _____
Print or Type City State Zip

Name: _____ Signature _____
Print or Type

Address: _____
Print or Type City State Zip

THE STATE OF TEXAS

COUNTY OF FALLS

BEFORE ME, THE UNDERSIGNED AUTHORITY, on this day personally appeared _____ known to me to be the person(s) whose name subscribed to the foregoing instrument, and acknowledged to me that he/she/they executed the same for the purpose therein expressed.

Given under my hand and seal of office, this _____ day of _____, 20____.

(seal)

Signature of Notary Public
or
Falls County Clerk, Elizabeth Perez

By: _____, Deputy