



Margie Ramirez Ibarra
Webb County Clerk
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Laredo, Texas 78040
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CERTIFICATE OF OWNERSHIP FOR INCORPORATED BUSINESS OR PROFESSION

Name In Which Business Is Or Will Be Conducted: _____

Business Address: _____

City _____ State _____ Zip _____

1. The name of the corporations, limited partnership, registered limited liability partnership or Limited Liability Company stated in its articles of incorporations, association, or organization, or other comparable document is _____
2. The state, county, or other jurisdiction under the laws of which it was incorporated, organized, or associated is, and the address of its registered or similar office in that jurisdiction is _____
3. The period (not to exceed ten years) during which this assumed name will be used is _____
4. The corporation is a (CIRCLE ONE) Business Corporation; Non-profit Corporation; Professional Corporation; Professional Association; Limited Partnership; Registered Limited Liability Partnership; Limited Liability Company or other type of corporation (specify) _____
5. If the corporation, limited partnership, registered limited liability partnership or limited liability company is required to maintain a registered office in Texas, the address of the registered office is _____ and the name of the registered agent at such address is _____. The address of the principal office (if not the same as the registered office) is _____
6. If the corporation, limited partnership, registered limited liability partnership or limited liability company is not required to or does not maintain a registered office in Texas, the office address in Texas is _____ and if the corporation, limited partnership, registered limited liability partnership or limited liability company is not incorporated, organized or associated under the laws of Texas, the address of its place of business in Texas is _____ and the office address elsewhere is _____
7. The county or counties where business or professional services are being or are to be conducted or rendered under such assumed named are (if applicable, use the designation "all" or "all except") _____
8. 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/their principal to execute and acknowledge the same.

Signature of office, representative or attorney-in-fact of the corporation

State of Texas

County of _____

This instrument was acknowledged before me by _____

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

Notary Public in and for the State of _____