



**Pam Harrison**  
 COUNTY CLERK, COOKE COUNTY  
 100 S. DIXON ST, GAINESVILLE, TEXAS 76240

## ASSUMED NAME (DBA) CERTIFICATE OF OWNERSHIP FOR BUSINESS OR PROFESSION

**NOTICE:** "Assumed Names/DBA" are valid only for a period not to exceed **10 years** from the date filed in the County Clerk's Office. THE COUNTY CLERK IS NOT RESPONSIBLE FOR VERIFYING THE ACCURACY OF THE INFORMATION CONTAINED IN AN "ASSUMED NAME/DBA" CERTIFICATE. THIS CERTIFICATE PROPERLY EXECUTED IS THE BE FILED IMMEDIATELY WITH THE COUNTY CLERK.

**NAME UNDER WHICH BUSINESS OR PROFESSIONAL SERVICES IS OR WILL BE CONDUCTED:**

(Print or type name of business)

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BUSINESS ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**BUSINESS IS TO BE CONDUCTED AS (CHECK ONLY ONE):**

- |                                                                 |                                                     |
|-----------------------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> <b>GENERAL PARTNERSHIP</b>             | <input type="checkbox"/> <b>LIMITED PARTNERSHIP</b> |
| <input type="checkbox"/> <b>INDIVIDUAL/ SOLE PROPRIETORSHIP</b> | <input type="checkbox"/> <b>OTHER</b> _____         |

**CERTIFICATE OF OWNERSHIP**

I/We the undersigned is/ are the owner(s) of the above business and my/our name(s) and address(es) given is/are true and correct and there are no other owners in said business.

**NAMES OF OWNERS**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Residence Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Residence Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Residence Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**THE STATE OF TEXAS AND COUNTY OF COOKE**

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_ those person(s) whose name(s) are listed above known to me to be the person(s) subscribed to the foregoing instrument and acknowledged to me that they are the owner(s) of the above named business and that they signed the same for the purpose and consideration herein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.

PAM HARRISON, COUNTY CLERK  
 COOKE COUNTY, TEXAS

\_\_\_\_\_  
 Signature of notary public (Seal) **OR** \_\_\_\_\_  
 Deputy Clerk (Seal)