



ASSUMED NAME WITHDRAWAL RECORDS, TRINITY COUNTY, TEXAS

AFFIDAVIT OF FACTS PERTAINING TO ASSUMED NAME CERTIFICATE

THE STATE OF TEXAS
COUNTY OF TRINITY

This is to certify, that I, _____ of the
(Please Print) (Owner's Name)
County of Trinity, State of Texas, have been connected with the business of _____

_____, as evidence by the
Book # _____ Page # _____, that is on file in the Office of Trinity County Clerk.

I AM NO LONGER ASSOCIATED WITH SAID BUSINESS AS OF THE _____ DAY OF _____, 20____.

Signature of Withdrawing Party

THE STATE OF TEXAS
COUNTY OF TRINITY

BEFORE ME, _____ in and for said County and State,
(Please Print) (Clerk/Deputy/Notary)

On this day personally appeared _____ known to me
(Please Print) (Owner's Name)

to be the person whose name is subscribed to the foregoing certificate, and acknowledged to me that,
he/she executed the same for the purpose and consideration therein expressed.

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

Clerk/Deputy Clerk/Notary Public