

DELIA BRIONES

El Paso County Clerk 500 E. San Antonio Suite 105 El Paso, Texas 79901 (915) 273-3532 Ext. 4028

BUSINESS NAME							
BUSINESS ADDRESS							
CITY		STATE	ZIP CODE_				
		to Title 5, §71.151(a) of the ctive for a term not to excee					
		BUSINESS WILL BE	CONDUCTED	AS A			
CHECK ONE	Practitioner	General Partnership	Sole Proprietorship		☐ Non-Profit Organization		
	☐ Joint Venture	Limited Partnership	☐ Joint Stoo	k Company	Real Estate Investment Trust		
CHECK ONE	☐ I AM a veteran	☐ I am NOT a veteran					
		CERTIFICATE (F OWNERSHIP	•			
NAME	SIGNATURE						
RESIDENCE A				ZIP CODE			
TYPE OF ID	DO NOT USE ID #	DO	ОВ	PHONE N	NUMBER		
NAME			SIGNATURE				
RESIDENCE A	DDRESS		ZIP CODE				
TYPE OF ID	DO NOT USE ID#	DO	DB	PHONE N	NUMBER		
NAME			SIGNATURE				
RESIDENCE A	RESIDENCE ADDRESS			ZIP CODE			
TYPE OF ID	Exp _	D0	DOB PHONE NUMBER				
I/We, the undersigned, is/are ownership(s) in said busines			e(s) and address(es) given is/are	e true and correct, and there is/are no Initials		
The State of Texas County of El Paso							
BEFORE ME, THE UNDERSI Known to me to be the person named business and that they	(s) whose name(s) is/are su	bscribed to the foregoing ins		r oath, acknowle	edged to me that they are the owner(s) of the ab		
	GIVEN UNDER MY HA	AND AND SEAL OF OFF	ICE, on		, 20		
PRESENTED VETERAN'S ID:	(SEAL)			DELIA BRIONES erk of El Paso County, Texas		
YES NO			By Deputy				
COUNTY CLERK'S OFFICE USE ONLY					Notary Public		