



KARA SANDS,
COUNTY CLERK
NUECES COUNTY, TEXAS

VETERAN OWNED No

ASSUMED NAME RECORD CERTIFICATE OF OWNERSHIP FOR
UNINCORPORATED BUSINESS OR PROFESSION

Business Name The Jackie Black Brain Cancer Foundation
Business Address 2601 Moran St City Corpus Christi State TX Zip 78405
Mailing Address 2601 Moran St City Corpus Christi State TX Zip 78405
Business is to be conducted as (check one):

Sole Proprietorship Sole Practitioner Joint Venture
 General Partnership Real Estate Investment Trust Other SOL(C)(3)

CERTIFICATE OF OWNERSHIP

NOTICE: A CERTIFICATE OF OWNERSHIP ARE VALID ONLY FOR A PERIOD NOT TO EXCEED 10 YEARS FROM THE DATE FILED IN THE COUNTY CLERK'S OFFICE (CHAPTER 36, SEC. 1, TITLE 4 - BUSINESS AND COMMERCE CODE) THIS CERTIFICATE PROPERLY EXECUTED IS TO BE FILED IMMEDIATELY WITH THE COUNTY CLERK.

I/WE, THE UNDERSIGNED, ARE THE OWNER(S) OF THE ABOVE BUSINESS AND MY/OUR NAME(S) AND ADDRESS(ES) GIVEN IS/ARE TRUE AND CORRECT, AND THERE IS NO OWNERSHIP(S) IN SAID BUSINESS OTHER THAN THOSE LISTED HEREIN BELOW.

Name Barbara Ann Canales Signature [Signature]
(PRINT) (First - Middle - Last Name)

Address 4920 Ocean Dr City Corpus Christi State TX Zip 78412

Name _____ Signature _____
(Print) (First - Middle - Last Name)

Address _____ City _____ State _____ Zip _____

Name _____ Signature _____
(PRINT) (First - Middle - Last Name)

Address _____ City _____ State _____ Zip _____

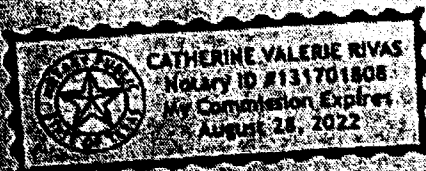
The State of Texas, County of Nueces

BEFORE ME, THE UNDERSIGNED AUTHORITY, on this day personally appeared

Barbara Ann Canales

known to me to be the person whose name is subscribed to the foregoing instrument and, under oath, acknowledged to me that he/she signed the same for the purpose and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS 24th DAY OF January, 2022



[Signature]
Notary Public



Kara Sands
Nueces County Clerk

NUECES COUNTY
ADDITIONAL REGISTRANTS FORM
FOR USE WITH ASSUMED NAME CERTIFICATE FOR CERTAIN UN-INCORPORATED PERSONS
OR CERTIFICATE OF ABANDONMENT

The Assumed Name under which the business or professional service conducted (type or print clearly) Ready or Not Foundation

Signature: [Handwritten Signature] Print name: Barbara Canales
Street address: 2601 Morgan St City: Corpus Christi State: TX Zip: 78405

Signature: _____ Print name: _____
Street address: _____ City: _____ State: _____ Zip: _____

Signature: _____ Print name: _____
Street address: _____ City: _____ State: _____ Zip: _____

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Signature: _____ Print name: _____
Street address: _____ City: _____ State: _____ Zip: _____

State of Texas County of Nueces:

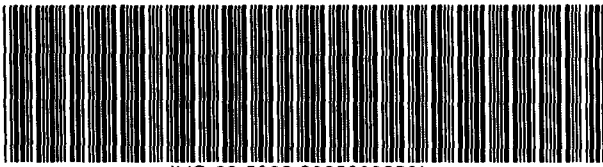
§
§

Before me, _____ the undersigned, on this day personally appeared _____
known to me to be the person whose name is subscribed to the foregoing instrument in the capacity therein stated, and acknowledged to me that
they have signed the same for the purposes and consideration therein expressed.

Seal of Notary Public:

Notary Public in and for the State of Texas

(Seal)



VG-63-2022-2022003656

Nueces County
Kara Sands
Nueces County Clerk

Instrument Number: 2022003656

Assumed Name

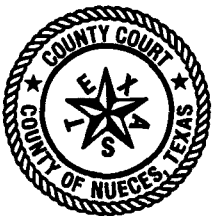
CORPORATION

Recorded On: January 24, 2022 03:00 PM

Number of Pages: 3

" Examined and Charged as Follows: "

Total Recording: \$19.00



STATE OF TEXAS

Nueces County

I hereby certify that this Instrument was filed in the File Number sequence on the date/time printed hereon, and was duly recorded in the Official Records of Nueces County, Texas

Kara Sands
Nueces County Clerk
Nueces County, TX

******* THIS PAGE IS PART OF THE INSTRUMENT *******

Any provision herein which restricts the Sale, Rental or use of the described REAL PROPERTY because of color or race is invalid and unenforceable under federal law.

File Information:

Document Number: 2022003656
Receipt Number: 20220124000213
Recorded Date/Time: January 24, 2022 03:00 PM
User: Catherine R
Station: CLERK02

Record and Return To:

BARBARA CANALES