Form #2204	Rev 9/2017	This space reserved for office us
	8711-2887	E STE OFFICE
FAX 512-463		
Filing Fee: N	one	OATH OF OFFICE
the State of Te	ties of the office of <u>PL</u> exas, and will to the best States and of this State, s	t of my ability preserve, protect, and defend the Constitution and I so help me God.
	÷	Signature of Officer on of Person Authorized to Administer Oath
State of	Certificatio TEXAS THROCKMORTON	
County of	TEXAS THROCKMORTON	
County of	TEXAS THROCKMORTON subscribed before me o	on of Person Authorized to Administer Oath on this12THday ofMAY, 202:
County of Sworn to and (Affix No only if on administer	TEXAS THROCKMORTON subscribed before me o	on of Person Authorized to Administer Oath on this12THday ofMAY, 202:Signature of Notary Public orSignature of Other Person Authorized to Administer A Oath
County of Sworn to and (Affix No only if on administer	TEXAS THROCKMORTON subscribed before me o	on of Person Authorized to Administer Oath on this12THday ofMAY, 202:

Form 2204