State of		 		
County of _				
	Design	ation of Agent for	Service of Process	
	Design	auton of rigent for	octivite of Flocess	
			personally appeared be	efore me
	Name of Applica	ant		
on this	day of		,, and, afte	r being
Day		Month	Year	
sworn, state	d:			
	undersigned applican cably designate:	t for certification as	a Foreign Legal Consultant, d	lo hereby
			Texas Board of Law Examin	ers
	Address: P.O. Box 1			
	Phone: 512-463-16	xas 78711-3486 521		
resider the ado of Law	nts of Texas, whenev	er after due diligenc at such new address	be rendered by me within or e service cannot be made upo as I shall hereafter file with the	n me at
				_
				_
				_
		Applicant's Sig	nature	
Subscribed	and sworn to before	e me on this	day of	
		Day	_ day of	, Year
(Seal)				
(Seal)		Signature of N	otary	
			on expires:	