

Form 506**(Revised 05/11)**

Return in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX 512 463-5709

[Instructions](#)**Filing Fee: \$15**

This space reserved for office use.

**Notice of Transfer of
Reservation of an Entity
Name****Entity Name Reserved**

The undersigned applicant files the notice of transfer of the reservation of name. The entity name that was reserved and is being transferred is: _____

The date of filing and file number of the reservation is: _____

*mm/dd/yyyy**File Number***Name of Applicant**

The name of the applicant on the reservation of name to be transferred is: _____

Name of Person to Whom Reservation Transferred (Choose and complete either A or B.)

☐ A. The transferee is an organized entity by the name of: _____

OR

☐ B. The transferee is an individual by the name of: _____

_____	_____	_____	_____
<i>First Name</i>	<i>M. I.</i>	<i>Last Name</i>	<i>Suffix</i>

Address of Transferee

_____	_____	_____	_____	_____
<i>Street or Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Country</i>	<i>Zip Code</i>

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: _____

Signature of applicant, applicant's attorney or agent