

FOR OFFICE USE ONLY

Formation etc)

Sole Prop)

Amt Remitted:

Date Remitted:

Agency Object:

CREDIT COMMISSIONER

License Number:

Date Amended:

Amended By:

Comments:

## Amendment to a Masterfile

Amendment or Change (select an option below)

Regulated Industry License:

OCCC License Number:

Proposed Date of Change:

□ Entity Type Change

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Current Licensee/Entity Name:			
Contact Person:	Phone Number:	Email:	
Select <b>Current</b> Entity Structure Type:			
Current Entity/Sole Prop Name:			
Select <b>New</b> Entity Structure Type:			
New Entity Name:			
Email the following ite	ms to licensing@occc.texas.gov		

1. Texas Secretary of State Certified Articles of Incorporation (Certificate of

2. Written statement requesting the entity structure change. (Signed & Dated)

3. IRS Document showing the FEIN for your new entity (SSN for Corp/LLC to

\*Changes to ownership and/or to an Entity's Federal Employee Identification number require a transfer of license. Failure to email all required items may result in denial.

Amendment fee of \$25 will be collected at a later time.

Activations, Address Changes, DBA Name Changes, Entity Name Changes, Location Contact,

Mailing Address, Surrenders and other license amendments must be filed in ALECS.

Authorized Signature Title

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