

STATE OF **FLORIDA**

COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____,
by _____, individually and as trustee for
_____, and who has produced _____
_____ as identification.

(Signature of Notary Public)

(Printed name of Notary Public)

My commission expires: _____

----- **Optional** -----

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title of Document: _____

Document Date: _____ Number of Pages: _____ + this certificate (1 page)

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Individual

Corporate Officer – Title(s): _____

Attorney in Fact

Trustee

Guardian or Conservator

Other: _____