

STATE OF **FLORIDA**

COUNTY OF _____

In my capacity as a Notary Public of the State of Florida, I certify that on the _____ day of _____, 20____,
at _____, _____ personally appeared
before me who is personally known to me or who has produced _____
as identification, and took an oath (or affirmation) for the purpose of giving testimony in the matter of:

.

(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.

Capacity(ies) Claimed by Signer

- Individual
- Corporate Officer – Title(s): _____
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: _____