

State of Florida

County of _____

Sworn to (or affirmed) and subscribed before me

this _____ day of _____, _____,

Day

Month

Year

by _____

Name of Person Swearing or Affirming

Signature of Notary Public

Notary Public – State of Florida

Name of Notary Typed, Printed or Stamped

- ☐ Personally Known
☐ Produced Identification

Type of Identification Produced _____

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