

Agent Authorization Affidavit - Property Owner Town of Penney Farms, FL

| Date: | |
|--|--|
| Town of Penney Farms | |
| Town Hall | |
| 4100 Clark Avenue | |
| Penney Farms, FL 30279 | |
| , cime, , a.m., , a coar c | |
| necessary): | te location (Provide Parcel numbers and address, attach additional sheets if |
| To Whom it May Concern: | |
| | is the owner of the property described in Exhibit B attached hereto. Said |
| to get as agent to file application(s) for | the above-referenced property |
| and in connection with such authorization to | o file such applications, papers, documents, requests, and other matters |
| necessary for such requested change. | o the such applications, papers, accuments, requests, and estate materials |
| necessary for such requested change. | |
| If owner is Individual: | If Owner is Corporate Entity:* |
| II OAME IS IIIdiaiddd: | Print Corporate Name: |
| | |
| Ву | Ву |
| Print Name: | Print Name: |
| | Title: |
| | |
| * If Owner is Corporate Entity, please provide | documentation illustrating that signatory is an authorized representative |
| of Owner; this may be shown through corpor | ate resolution, power of attorney, printout from sunbiz.org, etc. |
| | |
| STATE OF FLORIDA | |
| COUNTY OF CLAY | |
| | s de |
| | efore me this day of 2021, by |
| | |
| as id | lentification and who took an oath. |
| | |
| | (Signature of NOTARY PUBLIC) |
| | (Signature of NOTART POBLIC) |
| | |
| | (Printed name of NOTARY PUBLIC) |
| | (Finited hame of NotAtt 1 obtic) |
| | State of Florida at Large. |
| | My commission expires: |