Authorization of Tax Representative

STATE OF: FLORIDA			
COUNTY OF: HERNANI	00		
This serves as authorization for			
to represent me (us) in regard permission to file returns an property owned or manage appropriate governmental au	d petitions containing d by this firm, exam	information for the purp	ose of assessing cussing with the
Key#	Property	Address	
1.			
2.			
3.			
4.			
5.			
This authorization is in effe			vritten notice of
termination is issued by an	·		all communication
regarding any matter in whice addressed to:			
Executed this da			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
OWNER OF RECORD:	*		
	Print Name		
OWNER OF RECORD:		44555	
	Signature		
TITLE:			
The person signing on behalf of the	ie company must be the sa	nme as listed as the agent on	Sunbiz.org or be
notified on company letterhead, al	ong with supporting docur	ments, showing they have au	thority to sign on
behalf of the company.			
Subscribed and sworn to	before methis	_day of	_20
Notary Public			