

AFFIDAVIT

I, _____, do hereby certify that I have authorized the following individual(s) to act as agent(s) on my behalf to represent the real property owned by me, located at:

Property Address: _____
Legal Description: _____
Agent(s) Name: _____
Agent(s) Address: _____
Agent(s) Telephone: _____

Property Owner's Signature

State of Florida
County of Broward

The forgoing instrument was acknowledged before me, the undersigned Notary Public, this _____ day of _____, 20____, By _____
(Property Owner)

Notary Public, State of Florida

___ Personally known to me, or

___ Produced identification

Type of Identification

Notary Public Stamp/Seal

Notary Public Seal of Office