

State of \_\_\_\_\_

County of \_\_\_\_\_

I certify that this is a true and correct copy of a record in the possession of

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Dated: \_\_\_\_\_

\_\_\_\_\_  
*Notary Signature*

\_\_\_\_\_  
*Notary Name*

Notary Public in and for the State of

\_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

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