

Prepared by: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This space for recorder use only.

# Power of Attorney

KNOW ALL MEN BY THESE PREMISES

That \_\_\_\_\_ has/have made, constituted and appointed, and by these presents do make, constitute and appoint \_\_\_\_\_ attorney for me and in my name, place and stead

giving and granting unto my said attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises and fully, to all intents and purposes, as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney or substitute shall lawfully do or cause to be done by virtue hereof.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signed, sealed and delivered in the presence of:

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Post Office Address

\_\_\_\_\_  
Printed Name

STATE OF FLORIDA  
COUNTY OF WALTON

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me or has produced \_\_\_\_\_, as identification and who did/did not take an oath.

\_\_\_\_\_  
Notary Public