

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

This space for recorder use only.

# Revocation of Power of Attorney

KNOW ALL MEN BY THESE PREMISES

That I, \_\_\_\_\_, a resident of \_\_\_\_\_ County, \_\_\_\_\_, do hereby acknowledge that I executed a Power of Attorney appointing \_\_\_\_\_ as lawful attorney to manage my affairs. Be it further acknowledged that I, \_\_\_\_\_, being of sound mind and after explanations to me of the consequences of my actions, do hereby revoke, cancel, and make null and void the aforesaid Power of Attorney, instanter.

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

Signed, sealed and delivered in the presence of:

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

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

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

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

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
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