

AUTHORIZATION FOR RELEASE OF CONFIDENTIAL INFORMATION

(Please fully execute each authorization form)

TO WHOM IT MAY CONCERN:

I _____, hereby authorize and request every person, firm, officer, corporation, association, organization or institution having control of any documents, records or other information pertaining to me to furnish the original or copies of any such documents, records or other information to the Office of Financial Regulation or any of its authorized representatives for purposes of inspection or copying pursuant to Florida Statutes.

(Valid for six (6) months from date signed)

On this _____ day of _____ 20____, before me personally came _____, to me well known, who acknowledged before me that he is the _____ of _____, the corporation described herein and which executed the foregoing application certificate; that he knows the seal of said corporation; that the seal affixed to said application certificate is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation, and that he signed his name hereto by like order.

(L.S.)

(Signature of Notary Public or other party taking acknowledgment)

(Title of party taking acknowledgment)

Note: This acknowledgment may be taken within the State of Florida or within any other state of the United States by a notary public. In countries other than the United States, this acknowledgment may be taken by certificate of apostille pursuant to the Convention Abolishing the Requirement of Legalization for Foreign Public Documents (The Hague, October 5, 1961) or by an ambassador, a minister plenipotentiary, a minister extraordinary, a minister resident, a charge d'affairs, a consul-general, a vice consul-general, a deputy consul-general, a consul, a vice-consul, a deputy-consul, a consular agent, a vice consular agent, a commercial agent or a vice-commercial agent of the United States within his jurisdiction. The seal of his office or the seal of the office to which he is attached should be affixed.