

**Attorney in Fact Affidavit -
General (Non Durable) Power of Attorney**

BEFORE ME, the under signed Notary Public, appeared

(hereinafter "Affiant"), who has personal knowledge of the facts and matters set forth herein and being duly sworn, deposes and states:

1. On the _____ day of _____, 20____, _____ ("Principal"), executed a power of attorney appointing Affiant as attorney in fact.
2. The Principal was of sound mind and of legal age at the time the power of attorney was executed.
3. The Principal has not revoked the power of attorney.
4. Affiant does not have actual knowledge or actual notice of death or mental incapacity of the Principal. Affiant has not received notice of any facts indicating the Principal's death or mental incapacity.
5. Affiant is aware that grantee/lender and

are relying upon this Affidavit to issue title insurance policies without exception to the matter(s) noted above. Affiant does hereby indemnify

against any loss or damage occasioned as of reliance upon this Affidavit (including attorneys' fees and costs) caused as a result of any inaccuracies contained in this Affidavit.

6. Affiant is familiar with the nature of an oath and with the penalties provided by the laws of the State of Florida for falsely swearing to statements made in an Affidavit of this nature. Affiant further certifies that he/she has read this Affidavit and completely understands its contents.

Signature

Printed Name

STATE OF _____
COUNTY OF _____

Sworn to and subscribed before me, a Notary Public, this _____ day of _____, 20____, by _____.

(Signature of Notary Public)

(Print, Type or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced Identification
Type of Identification Produced