Form # 9B-3.053-2002-02

# Private Provider
# Plan Compliance Affidavit

Effective January 20, 2003

Private Provider Firm: My Amelia, Inc DBA Inspected.com

Private Provider: Spencer Moore

Address: 1250 S. Pine Island Rd Suite 400 Plantation, FL 33324

Phone: 954-820-4874 Fax: _____

Email: Permits@inspected.com

I hereby certify that to the best of my knowledge and belief the plans submitted were reviewed for and are in compliance with the Florida Building Code and all local amendments to the Florida Building Code by the following affiant, who is duly authorized to perform plans review pursuant to Section 553.791, Florida Statute and holds the appropriate license or certificate:

Name: Nathan Harris Plan Sheets: FL41990-R3 - WINDOWS
PRODUCT APPROVAL SPECIFICATION SHEET
FLOOR PLAN

Florida License/Registration/Certification #(s) and description:

RPX391

Signature of Reviewer: Nathan Harris 7/24/2026

SWORN AND SUBSCRIBED before me by Nathan Harris
being personally known to me X or having produced as identification _____
_____ and who being fully sworn and cautioned, state that the foregoing is true and correct to the best of his/her knowledge or belief.

Alayna S Cade
Signature of Notary

Alayna S Cade
Print Name

Notary Public: NOTARY STAMP BELOW

My commission expires:

Notary Public State of Florida
Alayna S Cade
My Commission HH 432189
Expires 8/10/2027