This is to certify that I, (We), Alice	e P Kinsey		,
as the owner of the below described	meta rame of state corporation rame (me	lude Corp Officer) as it appears on Pr	operty Appraiser)
Property tax Parcel ID number 23-		0	
	6 SE Grassland		
Shani D) Kina	An	
(Name of pe	rson authorized to sign as owner or place a s	to place a	
Select one: Mobile Home Tra	vel Trailer OUtility Pol	le Only OSingle Far	nily Home
OBarn OShed OG	farage OCulvert OO	ther (specify)	
I (We) understand that the named per on the parcel number I (we) have list waste and fire protection services lev	ed above and this could re		
Printed Name of Signor	Shaw Kinse Signature Shaw King Signature	<u>16-2</u> Date	9-24
Shani lang Printed Name of Signor	Shaw King- Signature		9/24
Printed Name of Signor	Signature	Date	
Sworn to and subscribed before me t	his 29 day of DU	, 20, 3 Yby	
physical presence or onlin	ne notarization and this (t	hese) person(s) are pe	rsonally
known to me or produced ID _	·		
Printed Name of Notary KERI VANAERNAM Notary Public - State of Florida Commission # HH 423805	Synature 2		
My Comm. Expires Nov 15, 2027 Bonded through National Notary Assn.			Created 12/202