## STATE OF FLORIDA COUNTY OF COLUMBIA

## LAND OWNER AFFIDAVIT

This is to certify that I, (We), (State Corporate	D Farms Inc. ion Name as it appears on the Property Appraisers Office website)
as the owner of the below described prop	erty:
Property tax Parcel ID number _ 0 9 -	75-17-09968-000
Subdivision (Name, lot, Block, Phase) / 33	SW CR778 High Spings, Fla.
Give my permission for Juan A	N 25 25
Circle one - Mobile Home / Travel Traile or more — Barn - Shed - Garage / Culv	er / Utility Pole Only / Single Family Home / vert / Other Fam. ly Home.
I (We) understand that the named person(s) above will be allowed to receive a building permit on the property number I (we) have listed above and this could result in an assessment for solid waste and fire protection services levied on this property.	
Langes Lawrence Wasis Owner Signature	10- 27- 22 Date
Leta Dece Owner Signature	10/27/22 Date
Owner Signature	Date
Sworn to and subscribed before me this	27 day of October, 2022, by
	ptarization and this (these) person(s) are
personally known to me or produce	OID FL. DRIVER LICENSE
Kallreine All allaine	KATHERINE A. WILLIAMS
Notary Public Signature	Notary Printed Name
Notary Pi	ERINE A WILLIAMS  plic State of Florida ission # HH 097804 Expires Feb 25, 2025