LICENSED QUALIFIER AUTHORIZATION

I, __Craig Stevens_____ (license holder name), licensed qualifier

for __ARAC Roof It Forward, LLC_____ (company name), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. Sandra Sisson	1. *Sandra Sisson*
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

_____   CCC1330047   May 3, 2024
Licensed Qualifiers Signature (Notarized)   License Number   Date

NOTARY INFORMATION:
STATE OF: __Florida_____ COUNTY OF: __Columbia_____

The above license holder, whose name is __Craig Stevens_____,
personally appeared before me and is known by me or has produced identification
(type of I.D.) __License_____ on this __5__ day of __May_____, 20 __24__.

_____
NOTARY'S SIGNATURE   (Seal/Stamp)