AFFIDAVIT & CERTIFICATE OF PROOF BY SUBSCRIBING WITNESS

l,, am 18 years o	ers of age or older, and my address is:	
Being first duly sworn, I do hereby declare that		
the conveyance titled	_ in my presence on	
To the best of my knowledge the Granter was at that ti under no constraint or undue influence. This affidavit is accordance with s. 695.03, Florida Statutes.		
Signature	 Date	
STATE OF FLORIDA		
COUNTY OF PINELLAS		
Sworn to (or affirmed) and signed before me by means this day of, by		
□ Personally Known to me or □ who has produced	as identification.	
	Signature of Notary Public	
	Print, Type, or Stamp Name of Notary Public	