

Agent Authorization – General Partnership

Date: _____

City of Jacksonville
Downtown Investment Authority
117 West Duval Street, Suite 310
Jacksonville, Florida 32202

Re: Agent Authorization for the following site location in Jacksonville, Florida:

Address: _____ RE#(s): _____

To Whom it May Concern:

You are hereby advised that _____, as _____ of _____, a general partnership organized under the laws of the state of _____, hereby certify that said general partnership is the Owner of the property described in Exhibit 1. Said owner hereby authorizes and empowers _____ to act as agent to file application(s) for _____ for the above referenced property and in connection with such authorization to file such applications, papers, documents, requests and other matters necessary for such requested change as submitted to the Jacksonville Planning and Development Department.

(signature) _____

(print name) _____

**STATE OF FLORIDA
COUNTY OF DUVAL**

Sworn to and subscribed and acknowledged before me this _____ day of _____ 20____, by _____, as _____, of _____, a General Partnership, who is personally known to me or who has produced _____ as identification and who took an oath.

(Signature of NOTARY PUBLIC)

(Printed name of NOTARY PUBLIC)

State of Florida at Large.
My commission expires: _____