

**City of Key West
Planning Department**



Authorization Form
(Where Owner is a Business Entity)

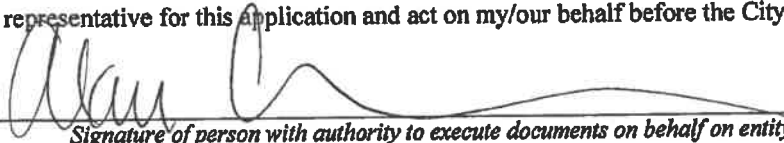
Please complete this form if someone other than the owner is representing the property owner in this matter.

I, Alan Clifton _____ as
Please Print Name of person with authority to execute documents on behalf of entity

Vice President of Manager _____ of Passco Ocean DST, a Del. statutory trust
Name of office (President, Managing Member) *Name of owner from deed*

authorize Critical Concern Consultants (James T. Hendrick and Donna Bosold)
Please Print Name of Representative

to be the representative for this application and act on my/our behalf before the City of Key West.



Signature of person with authority to execute documents on behalf on entity owner

Subscribed and sworn to (or affirmed) before me on this October 17, 2017
Date

by Alan Clifton _____
Name of person with authority to execute documents on behalf on entity owner

He/She is personally known to me or has presented a California driver license as identification.

~~_____
Notary's Signature and Seal~~

~~_____
Name of Acknowledger typed, printed or stamped~~

~~_____
Commission Number, if any~~

SEE ATTACHED NOTARY CERTIFICATE

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

- See Attached Document (Notary to cross out lines 1-6 below)
- See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary)

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

Signature of Document Signer No. 1 *Signature of Document Signer No. 2 (if any)*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
 County of Orange

Subscribed and sworn to (or affirmed) before me
 on this 17th day of October, 2017,
 by Alan Clifton
Date Month Year



(1) Alan Clifton
 (and (2) _____),
Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence
 to be the person(s) who appeared before me.

Signature *Jenny W. Barrington*
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____