AFFIDAVIT OF LICENSING GOOD STANDING

STATE OF MICHIGAN)
)
COUNTY OF OSCEOLA)

The undersigned, _____, being duly sworn, hereby deposes and says:

1. _____ has never had a commercial license or certificate issued by a licensing authority in Michigan or any other jurisdiction that has been denied, restricted, suspended, revoked, or not renewed.

I declare that, to the best of my knowledge and belief, the information herein is true, correct, and complete.

Executed this ____ day of _____, 20___.

On behalf of: _____

By: _____

Its: _____

……

NOTARY ACKNOWLEDGEMENT

STATE OF _____)
) ss:
COUNTY OF _____)

The foregoing instrument was acknowledged before me this _____ day of _____, 20__, by _____. Said _____ is personally known to me or has produced _____ as identification.

_____
Signature of Notary Public

_____
Printed Name of Notary Public
State of Michigan
Commission Number: _____
My Commission Expires:_____