AFFIDAVIT OF AUTHORIZATION

FOR PE	TITION NUMBERS(S)	PL20180002194, Tree Farm MPUD Ame	endment	
William B. Yeom		(print name), as	Manager	(title, if
1' -1-1-1	ef TDO Tone Form 1 LLC		(compa	ny, I <u>f applicable</u>), swear or affirm
under oath,	that I am the (choose	one) owner 🗸 applicar		
	the referenced prope	erty as a result of any ac	tion approved by the	ose covenants and restrictions on e County in accordance with this
			tion are nonesi aliu i	ata or other supplementary matter true;
	I have authorized the	e staff of Collier County to	the request made thi	perty during normal working hours rough this application; and that d subject to the conditions and
				_ to act as our/my representative
5.	We/I authorize Q. Grad in any matters regard	y Minor and Associates, P.A. and Coleman ling this petition including	1 through 2 above.	
*Notes:			d by the corp pres (or v nres
If the applicable	plicant is a Limited Lia	nanv's "Manadind Mettibe	r."	(L.O.), then the documents energy
	" (' de malain	than tunically a narthar C	an sidh on beriail Ui	the partnership.
• If the on	onicant is a partitoromp	artnership then the gener	al partner must sign	and be identified as the "general
northorn"	of the named narthers	hin		
	1: - 1: - twent thou !	that must include the trust	tee's name and the w	vords "as trustee".
• In coch	instance first determi	ne the applicant's status.	e.g., individual, corp	porate, trust, partnership, and then
use the	appropriate format for	that ownership.		
430 110	appropriate remains			
		coloro that I have read t	he foregoing Affida	avit of Authorization and that
Under per	names or perjury, i u	eciale illat i llave lead t	ine foregoing / initial	
the facts	stated in it are true.			1 19
	1 for	>		2·le·19
	Signatur	е		Date
STATE O	F FLORIDA	1/0		
COUNTY	OF COLLIER DON	1/162		1
	OF COLLIER	worn to (or affirmed) and s	subscribed before me	e on <u>kb lo 2019</u> (date) by
William B. Yeom			(name of person p	roviding bath of authmation, as
Manager for TB	C Tree Farm 1, LLC	who is personally kno	own to me or who ha	as produced 7 4000
(type of id	entification) as identifi	cation.	Mel An	a Barrott
STAMP/SE	Nota My C	CAROL ANN KENNEGY The Public - State of Florida Commission # FF 931390 Comm. Expires Dec 15, 2019 and through National Netary Assn.	Signature of No	tary Public /

AFFIDAVIT OF AUTHORIZATION

FOR PET	TITION NUMBERS(S)	PL20180002194, Tree Farm MPUD An	nendment		
William B. Yeom	nans Jr.	(print name), a	S Manager		_(title, if
•,		(print ricino), c	(compar	ny, If applicable), s	wear or affirm
applicable) ounder oath,		one) owner ✓ applica		aser and that:	
	the referenced prope	secure the approval(s) rty as a result of any a and Development Code;	ction approved by the	e County in accord	adrioo with time
	All answers to the que	estions in this application	ation are nonest and t	rue.	
	I have authorized the	staff of Collier County t estigating and evaluating transferred, conveyed	o enter upon the prop	ough this application	JII, aliu liial
	restrictions imposed t	by the approved action.			
5.	Well authorize Q. Grady	Minor and Associates, P.A. and Colema ing this petition including		_ to act as our/my	representative
 If the app typically life If the app partner If the app partner In each if use the a 	plicant is a Limited Lia be signed by the Comp plicant is a partnership, plicant is a limited par of the named partnersh plicant is a trust, then to instance, first determinal appropriate format for t	hey must include the trus ne the applicant's status	or Limited Company (er." can sign on behalf of t ral partner must sign stee's name and the w , e.g., individual, corp	he partnership. and be identified ords "as trustee". orate, trust, partne	as the "general ership, and then
	Signature	9	-	Date	
OTATE OF	E EL OPIDA				
COUNTY	F FLORIDA OF COLLIER PUNC	Uad		, w. J.	2019
		vorn to (or affirmed) and	subscribed before me _ (name of person pr	on <u>OBAL</u>	(date) by
William B. Yeoma		who is personally kn	_ (name of person pro own to me or who has		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Tree Farm 2, LLC		SWIT to the of who has	produced produced	10
(type of ide	entification) as identific		/ aut fran	Durna	4
STAMP/SEA	Notary Gon My Cor Ronded	AROL ANN KENNEDY / Public - State of Florida nmission # FF 931390 nm. Expires Dec 15, 2019 through National Natary Asia	€ Signature of Not	агу Ривпс	9