

CERTIFICATE OF SOLE PROPRIETORSHIP

I CERTIFY THAT _____ (the "Entity"),
NAME OF ENTITY

_____, is a sole proprietorship and I expressly warrant
SOCIAL SECURITY/FEDERAL TAX ID #

and guarantee that I am authorized to act on behalf of the Entity.

SIGNATURE OF SOLE OWNER OF ENTITY

PRINTED NAME OF SOLE OWNER

____/____/_____
DATE

This certificate will expire on ___/___/___, five years after the date of authorized signature