## Certification of Authority

I	, an	officer of	hereby request
	ame		npany Name
-	- · ·		on behalf of said company and its bsidiaries are wholly owned or
	*	•	certify that I am an employee of
· -	Company Name		
		and the information	on I have provided is correct.
(	Company Name		
statements to the regulations on e	e United States Governn	nent and for the vio	or making false or fraudulent lation of any United States laws or and correct.
•			
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			Printed Name
			Title