State of Minnesota

County of _________________________

This instrument was acknowledged before me on _________________________ (date) by

______________________________________________ (name(s) of individual(s)) as

_______________________ (type of authority, e.g., officer, trustee, etc.) of

______________________________________________ (name of party on behalf of whom the

instrument was executed).

(Stamp)

_______________________
(Signature of notarial officer)
Notary Public

_______________________
My commission expires: