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13. I hereby certify that the information supplied with this filing does not qualify for the evenption stated in Section indicated on this report or supplemental report is true and accurate and that my signature shall have the same of the corporation or the receiver or trustee empowered to execute this report are required by the presence of the corporation or an attachment with an address with all other like empowered to execute the same of stated in Section (SIGNATURE:	on 119.07(3)(i), Florida Statutes. I further certify that the information ne legal effect as if made under oath; that I am an officer or director lorida Statutes; and that my name appears in Block 11 or Block 12 if