

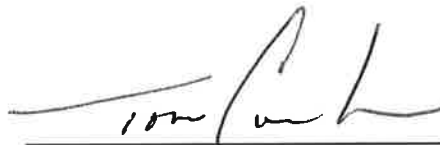
STATE OF FLORIDA
COUNTY OF BREVARD

I Tom Goodson as manager _____, after being duly sworn, deposes and says:

The undersigned is the owner of the real property described as follows:
Brevard County Parcel ID 24-35-35-00-755, Tax ID 2409190.
The N 1/2 of SE 1/4 of SE 1/4 EX RD R/W/

There are no mortgages on the above described property

Dated this 11th day of August 2025.



Signature

STATE OF FLORIDA
COUNTY OF BREVARD

The foregoing instrument was sworn to before me this 11th day of August 2025, by
Tom Goodson, who is personally known to me or who has
produced _____ as identification, and who did take an oath.

Notary Public:



State of Florida at Large
My Commission Expires:

(SEAL)



KRISTINE IGNAZITO
Commission # HH 671222
Expires June 19, 2029