## SPECIMEN SIGNATURE OF ATTORNEY-IN-FACT

The attorney-in-fact acknowledges that the foregoing is his/her signature.		
[Attorney-in-Fact] [Date]		
STATE OF GEORGIA ) ) ss. County of )		
[Insert name of Attorney-in-Fact] personally appeared before me who, being of say and acknowledge that the foregoing was his/her signature.	łuly swori	n, did
SUBSCRIBED AND SWORN to before me this day of	_ , 20	_·
NOTARY PUBLIC My commission expires:		