AFFIDAVIT OF RE-CERTIFICATION

STATE OF OHIO:  )
  ) S.S.
CUYAHOGA COUNTY  )

I, ___________________, being first duly sworn, depose and say that I am the __________________________ of __________________________, and the foregoing information in this affidavit and application is true to the best of my knowledge.

NOTARIZATION: (Sign in the presence of a NOTARY PUBLIC)

Signature: __________________________
Name (print): __________________________
Title: __________________________
Date: __________________________

State of __________________________ County of __________________________
On this the __________________________ day of __________________________ 20_____, before me appeared __________________________, that he or she was properly authorized by __________________________, to execute the Affidavit and did so of his or her free act and deed.

(Seal) Notary Public __________________________ My commission expires __________________________