



STAFF USE ONLY

RECEIVED

Intake Date: _____

By: _____

By Planning and Zoning at 10:38 am, Jun 08, 2016

Planning & Zoning12300 Forest Hill Blvd., Wellington, FL 33414 (561) 791-4000 PZApplications@wellingtonfl.gov**PART 1: PLANNING AND ZONING GENERAL APPLICATION**

(Completed Part 1 and 2 of the Application is required)

INSTRUCTIONS:

1. Date of required pre-application meeting: N/A
2. Please complete all questions on the application. If not applicable, indicate with N/A.
3. Provide required attachments as shown on the checklist (Part 2)
4. Check the appropriate type of request (Must complete Part 2 of the application specific to your request):

- | | | |
|---|--|---|
| <input type="checkbox"/> Administrative Appeal | <input type="checkbox"/> Development Order/
Amendment/Other | <input type="checkbox"/> Site Plan/Amendment/
Subdivision |
| <input type="checkbox"/> Administrative Variance | <input checked="" type="checkbox"/> Easement/Right-Of-Way | <input type="checkbox"/> Special Permit Use |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Vacation Abandonment | <input type="checkbox"/> Unity of Title/Unity of
Control/Release |
| <input type="checkbox"/> Architectural Review Board | <input type="checkbox"/> Master Plan/Amendment | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Comprehensive Plan
Amendment | <input type="checkbox"/> Minor Site Plan Amendment | <input type="checkbox"/> Zoning Text Amendment |
| <input type="checkbox"/> Conditional Use/Compatibility
Determination | <input type="checkbox"/> Rezoning | |

Multiple requests may be selected. A completed Part 2 Application for each request shall be submitted with a completed Part 1: Planning and Zoning General Application.

Application Fee: \$ 1,500.00 (Total fee for all requests)

(Note: the application fee is an initial deposit and could be as all above applications are cost recovery.)

I. PROPERTY OWNER AND AGENT INFORMATION

Property Owner(s) of Record: Christian and Tracy Harris

Address: 14399 Rolling Rock Place City: Wellington ST: FL Zip: 33414

Phone: _____ Cell: 917-880-8931

Email Address: tracyrharris@yahoo.com

Applicant (if other than owner): _____

Address: _____ City: _____ ST: _____ Zip: _____

Phone: _____ Cell: _____

Email Address: _____

Agent & Company Name: Francisco J. Gonzalez, Esq. Gonzalez, Shenkman & Buckstein, P.L.

Address: 1035 So. State Road 7 Ste 312 City: Wellington ST: FL Zip: 33414

Phone: 561-227-1575 Cell: _____

Email Address: fgonzalez@gsblawfirm.com

Consultants: If applicable to the request, please attach a separate list of all consultants that will provide information on this request. Include the name, address, telephone number, and fax number as well as the type of professional service provided.

Authorization or Power of Attorney must be attached if applicant is other than owner.

II. REQUEST

A. Describe type of request:

Easement Abandonment

III. PROPERTY LOCATION

A. Is the subject property located within one mile of another municipality? [] yes [X] no

If 'yes' please specify: _____

B. Property Control Number (PCN): If additional PCNs, list on a separate sheet and attach to the application.

PCN: 73-41-44-17-01-060-0030

C. Total Acreage of Subject Property 4.7570

D. Project Name: _____

E. Project Address: 14399 Rolling Rock Place, Wellington, Florida 33414

F. General Location Description (proximity to closest major intersection in miles or fractions thereof):

Corner of Wellington Trace and Rolling Rock Place

IV. LAND USE AND ZONING INFORMATION

A. Zoning Designation: RE Future Land Use Designation: _____

B. Existing Use(s) on Property: Residential/Agricultural

C. Proposed Use(s): construction of a barn and improvements

D. Do you have a Zoning Confirmation for this project? If so, please attach _____

V. COMPLIANCE

(Attach additional sheets if necessary)

A. Is property in compliance with all previous conditions of approval and/or applicable LDR requirements?

[X] yes [] no. If no, please explain: _____

B. Code Enforcement Case Number(s) _____

C. Report on the status of all previous conditions of approval: _____

VI. PROJECT HISTORY

List in sequence the last five approvals starting with the most recent.

Petition Number	Request	Action	Date	Resolution/ Ordinance Number
N/A		UNIT Y OF TITLE	2015	
N/A		RESIDENCE BUILT	1999	

VII. ADJACENT PROPERTIES

Adjacent Property to the:	Land Use Designation	Zoning Designation	Existing Use(s) of Property	Approved Use(s) of Property*
SUBJECT SITE		RE	RESIDENTIAL	
NORTH		RE	RESIDENTIAL	
SOUTH		RE	RESIDENTIAL	
EAST		RE	RESIDENTIAL	
WEST		RE	RESIDENTIAL	

VIII. OWNER/APPLICANT ACKNOWLEDGEMENT

I/We do hereby swear/affirm that I/we am/are the owner(s) of the property referenced in this application.

I/We certify that the above statements or showings made in any paper or plans submitted herewith are true to the best of my/our knowledge and belief. Further, I/we understand that this application, attachments and fee become part of the official record of the Planning & Zoning Department of Wellington and the fee is not refundable. I/We understand that any knowingly false information given by me/us will result in the denial, revocation or administrative withdrawal of the application or permit. I/We further acknowledge that additional information may be required by Wellington in order to process this application.

I/We further consent to Wellington to publish, copy or reproduce any copyrighted document for any third party submitted as part of this application.

I/We, the aforementioned owner(s), do hereby give consent to (Agent/Representatives Name) Francisco J. Gonzalez, Esquire to act on my/our behalf to submit this application, all required material and documents, and attend and represent me/us at all meetings and public hearings pertaining to the request(s) and property I/we own described in the attached application. Furthermore, as owner(s) of the subject property, I/we hereby give consent to the party designated above to agree to all terms or conditions that may arise as part of the approval of this application for the proposed use.

Signature(s) of Owner(s)

Print Name(s): Christian Harris

Tracy R. Harris

NOTARY

STATE OF Florida

COUNTY OF Palm Beach

The foregoing instrument was acknowledged before me this 25 day of May, 2016 by

Christian Harris & Tracy R Harris They are He/She is personally known to me or has produced

_____ as identification and did/did not take an oath.

(Signature of Notary)

Laura J. Kruger

(Name – Must be typed, printed, or stamped)

My Commission Expires: _____

(NOTARY'S SEAL OR STAMP)



LAURA J. KRUGER
MY COMMISSION # FF 965753
EXPIRES: May 22, 2020
Bonded Thru Budget Notary Services

IX. AGENT ACKNOWLEDGEMENT

I/We do hereby swear/affirm that I/we am/are the agent(s) for the property referenced in this application.

I/We certify that the above statements or showings made in any paper or plans submitted herewith are true to the best of my/our knowledge and belief. Further, I/we understand that this application, attachments and fee become part of the official record of the Planning & Zoning Department of Wellington and the fee is not refundable. I/We understand that any knowingly false information given by me/us will result in the denial, revocation or administrative withdrawal of the application or permit. I/We further acknowledge that additional information may be required by Wellington in order to process this application.

I/We further consent to Wellington to publish, copy or reproduce any copyrighted document for any third party submitted as part of this application.

Signature(s) of Agent(s):

Print Name(s): **Francisco J. Gonzalez**

NOTARY

STATE OF Florida

COUNTY OF Palm Beach

The foregoing instrument was acknowledged before me this 25 day of May, 2016 by Francisco J Gonzalez. He/She is personally known to me or has produced _____ as identification and did/did not take an oath.

(Signature of Notary)

Laura J. Kruger

(Name – Must be typed, printed, or stamped)

My Commission Expires: _____

(NOTARY'S SEAL OR STAMP)



LAURA J. KRUGER
MY COMMISSION # FF 965753
EXPIRES: May 22, 2020
Bonded Thru Budget Notary Services



Planning and Zoning Department

12300 Forest Hill Blvd., Wellington, FL 33414 Phone (561) 791-4000 pzapplications@wellingtonfl.gov

STAFF USE ONLY

Intake Date: _____

By: _____

Petition # _____

PART 2: EASEMENT / RIGHT-OF-WAY VACATION ABANDONMENT APPLICATION

I. SUBMITTAL CHECKLIST

PLEASE CHECK

YES NO N/A

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- a. Provide five (5) copies of the following items:
 1. Completed application (Part 1 and Part 2)
 2. Signed and sealed survey (not more than one year old) including any and all easements of record (referenced by OR Book and Page) prepared by a surveyor registered in the State of Florida.
 3. Sketch and Description accurately drawn and legally describing the area (easement, plat or right-of-way) to be abandoned.
 4. Location Map
 5. Completed Utility Easement Consent Forms.
 6. Warranty Deed for the property.
 7. Letters to the adjacent property owners. If the petition is for a vacation of a public right-of-way, notarized letters from all abutting property owners consenting to the abandonment are required.
 8. Tax records showing all taxes are paid to date.
- b. Application fee.
- c. A list identifying the ownership, including correct mailing addresses and legal descriptions, of the affected properties.
- d. A list and tax map of all property owners within a three hundred (300) foot radius of boundary lines of the property to be abandoned from the most recent tax roll information as provided by the Palm Beach County Property Appraiser's Office.
- e. Executed affidavit signed by the person responsible for completing the property owner list.
- f. One (1) set of POSTAGE PAID envelopes with the typed names of the owners within a three hundred (300) foot radius of the boundary lines of the subject property, Wellington's return address and completed certified mail cards required.
- g. Electronic files (PDF, JPEG, Word) of all items on the checklist, including the application, saved with proper corresponding title and legal description in Word format including the **legal description of the area to be abandoned in Word format.**

II. VACATION/ABANDONMENT AFFIDAVIT

The undersigned hereby petitions the Council of Wellington, to vacate, abandon, discontinue and close a (type and dimension of easement or right-of-way), 12 foot utility easement easement/right-of-way and to renounce and disclaim any right-of-way to Wellington and the public in and to any land in connection therewith.

The undersigned hereby certifies that:

1. The easement or right-of-way to be abandon was acquired and recorded in Plat Book 41 Page(s) 103-105 of the Public Records of Palm Beach County, Florida.
2. In the event this petition is granted, the vacation of the subject easement or right-of-way will not adversely affect other property owners.
3. The petition site is not a part of any Federal, State or Local highway/roadway jurisdiction and was not acquired or dedicated for Federal, State or Local highway/roadway purposes;
4. That attached hereto is a listing which clearly and legibly identifies the ownership, including correct mailing addresses and legal descriptions of the affected properties.
5. All applicable utilities providing service to or within the petition site have granted consent to the proposed vacation/abandonment (copy of consent forms enclosed).
6. The following constitutes a complete and accurate schedule of all owners abutting/affected properties. **Provide a copy of the letter sent to each property owner notifying them of the proposed abandonment. If the petition is for a vacation of a public right-of-way, notarized letters from all abutting property owners consenting to the abandonment are required.**

<u>Name</u>	<u>Address</u>	<u>Description of Property</u>
Kevin & Michele Flynn	14518 Wellington Trace, Wellington, FL 33414	Lot 5, Block 60, Saddle Trail Park of Wellington

6. A privilege fee may apply for any right-of-way that is under the jurisdiction and control of the Village Council/Acme Improvement District. The amount of the privilege fee is calculated pursuant to the method provided in Section 54-55 of the Wellington Code of Ordinance and will be established by the Village Council.

The purpose and justification for the vacation/abandonment is as follows:

Construction of a barn and improvements which cross through lots 3 and 4 and encroach into the easement.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING APPLICATION AND THAT THE FACTS STATED IN IT ARE TRUE. FURTHER, I/WE UNDERSTAND THAT THIS APPLICATION BECOMES PART OF THE OFFICIAL RECORD OF THE WELLINGTON CLERKS OFFICE. I UNDERSTAND THAT ANY KNOWINGLY FALSE INFORMATION GIVEN WILL RESULT IN ENFORCEMENT ACTIONS BY THE VILLAGE.

Owner (Printed): Christian and Tracy Harris

Owner Signature:

[Handwritten signatures of Christian and Tracy Harris]

Date:

5/25/14
5/25/16

NOTARY

STATE OF FLORIDA
COUNTY OF Palm Beach

The foregoing instrument was acknowledged before me this 25 day of

May, 20 16 By Christian and Tracy Harris, who is
personally known to me or has produced _____ as
identification and who did/did not take an oath.

[Handwritten signature of Laura J. Kruger]
Signature of person taking Acknowledgement

Laura J. Kruger

Printed Signature

My Commission Expires:



LAURA J. KRUGER
MY COMMISSION # FF 965753
EXPIRES: May 22, 2020
Bonded Thru Budget Notary Services

RECEIVED

By Planning and Zoning at 10:35 am, Jun 08, 2016

**Planning and Zoning Department**

12300 Forest Hill Blvd., Wellington, FL 33414 Phone (561) 791-4000 pzapplications@wellingtonfl.gov

III. UTILITIES EASEMENT VACATION/ABANDONMENT CONSENTCircle 1 utility per form and fax it to the number indicated.
(To be used for proposed abandonment of utility easements only)**Comcast Cable****Fax (561) 393-6209****AT&T****Fax (561) 964-3499****FP&L****Fax (561) 616-1625****Florida Public Utilities****Fax (561) 838-1769**

I am the record title holder of property located at 14399 Rolling Rock Place, Wellington, Florida
 I propose to apply for a permit from the Village of Wellington to construct or install a _____
 _____ in the 12 foot utility _____ easement

on my property. The legal description of this property is LOT 3 & 4 BLOCK 60
 SUBDIVISION Saddle Trail Park of Wellington, PUD

In the event your company has no objections to this improvement please complete this form. I understand that your company will not be responsible in any way for repairs to, or replacement of, any portion of the above referenced improvement and that any removal or replacement of this improvement necessary for your use or access of this easement will be done at the expense of the property owner or their successors in interest.

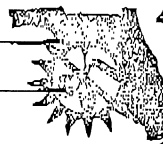
PROPERTY OWNER'S NAME Christian & Tracy Harris

PROPERTY OWNERS SIGNATURE _____

ACKNOWLEDGEMENT:

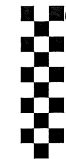
We agree to the proposed improvement under the circumstances described above,

Name of easement holder: _____

FLORIDA PUBLIC UTILITIES CO.**PO BOX 3395**By: PETER BONO**WEST PALM BEACH FL 33402-3395**Title: ENGINEERING TECHNICIANDate: 2/18/2016**48 HOURS BEFORE YOU DIG
CALL SUNSHINE****1-800-432-4770****IT'S THE LAW IN FLORIDA**

Please return this form to the applicant for submittal with the application.

Applicant contact information: Gonzalez, Shenkman & Buckstein, PL, Attn: L. Kruger,1035 South State Road 7, Suite 312, Wellington, FL 33414 Ph: 561-227-1575 FX: 227-1574

**Planning and Zoning Department**

12300 Forest Hill Blvd., Wellington, FL 33414 Phone (561) 791-4000 pzapplications@wellingtonfl.gov

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I am the record title holder of property located at 14399 Rolling Rock Place, Wellington, Florida.
I propose to apply for a permit from the Village of Wellington to construct or install a barn and
improvements that cross Lots 3 & 4 in the 12 foot utility easement
on my property. The legal description of this property is LOT 3 & 4 BLOCK 60
SUBDIVISION Saddle Trail Park of Wellington, PUD

In the event your company has no objections to this improvement please complete this form. I understand that your company will not be responsible in any way for repairs to, or replacement of, any portion of the above referenced improvement and that any removal or replacement of this improvement necessary for your use or access of this easement will be done at the expense of the property owner or their successors in interest.

PROPERTY OWNER'S NAME Christian & Tracy HarrisPROPERTY OWNERS SIGNATURE **ACKNOWLEDGEMENT:**

We agree to the proposed improvement under the circumstances described above,

Name of easement holder: By: Title: Construction Tech IIIDate: 2/20/2016

Please return this form to the applicant for submittal with the application.

Applicant contact information: Gonzalez, Shenkman & Buckstein, PL, Attn: L. Kruger,1035 South State Road 7, Suite 312, Wellington, FL 33414 Ph: 561-227-1575 FX: 227-1574



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III. UTILITIES EASEMENT VACATION/ABANDONMENT CONSENT

Circle 1 utility per form and fax it to the number indicated
(To be used for proposed abandonment of utility easements only)

Comcast Cable

Fax (561) 393-6209

✓ AT&T

Fax (561) 964-3499 (305) 552-5979

FP&L

Fax (561) 616-1625

Florida Public Utilities

Fax (561) 838-1769

I am the record title holder of property located at 14399 Rolling Rock Place, Wellington, Florida.
I propose to apply for a permit from the Village of Wellington to construct or install a barn and
improvements that cross Lots 3 & 4 in the 12 foot utility easement

on my property. The legal description of this property is LOT 3 & 4 BLOCK 60
SUBDIVISION Saddle Trail Park of Wellington, PUD

In the event your company has no objections to this improvement please complete this form. I understand that your company will not be responsible in any way for repairs to, or replacement of, any portion of the above referenced improvement and that any removal or replacement of this improvement necessary for your use or access of this easement will be done at the expense of the property owner or their successors in interest.

PROPERTY OWNER'S NAME Christian & Tracy Harris

PROPERTY OWNERS SIGNATURE Christian Harris

ACKNOWLEDGEMENT:

We agree to the proposed improvement under the circumstances described above,

Name of easement holder: AT & T

By: Angela Harris

Title: Mgr OSP Plan & Eng Design

Date: 8/22/16

Please return this form to the applicant for submittal with the application.

Applicant contact information: Gonzalez, Shenkman & Buckstein, PL, Attn: L. Kruger,

1035 South State Road 7, Suite 312, Wellington, FL 33414 Ph: 561-227-1575 FX: 227-1574



Planning and Zoning Department

12300 Forest Hill Blvd., Wellington, FL 33414 Phone (888) 781-4000 pzapplications@wellingtonfl.gov

10. UTILITIES EASEMENT VACATION/ABANDONMENT CONSENT

Circle 1 utility per form and fax it to the number indicated
(To be used for proposed abandonment of utility easements only)

Comcast Cable

Fax (561) 393-6209

AT&T

Fax (561) 964-3499

FP&L

Fax (561) 616-1625

Florida Public Utilities

Fax (561) 838-1769

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I propose to apply for a permit from the Village of Wellington to construct or install a barn and
improvements that cross Lots 3 & 4 in the 12 foot utility easement
on my property. The legal description of this property is LOT 3 & 4 BLOCK 60
SUBDIVISION Saddle Trail Park of Wellington, PUD.

In the event your company has no objections to this improvement please complete this form. I understand that your company will not be responsible in any way for repairs to, or replacement of, any portion of the above referenced improvement and that any removal or replacement of this improvement necessary for your use or access of this easement will be done at the expense of the property owner or their successors in interest.

PROPERTY OWNER'S NAME Christian & Tracy Harris

PROPERTY OWNERS SIGNATURE [Signature]

ACKNOWLEDGEMENT:

We agree to the proposed improvement under the circumstances described above.

Name of easement holder: EPZ

By: Edward Jenkins

Title: Evangelicalism

Date: 04/13/16

Please return this form to the applicant for submittal with the application.

Applicant contact information: Gonzalez, Shenkman & Buckstein, PL, Attn: L. Kruger, 561-
1035 South State Road 7, Suite 312, Wallington, FL 33414 Ph: 561-227-1575 FX: 227-1574



Prepared by and return to:

Donald P. Dufresne, Esquire
Attorney at Law
Greenspoon Marder PA
525 Okeechobee Blvd Suite 1570
West Palm Beach, FL 33401

File Number: Spire

CFN 20150238013
OR BK 27631 PG 0591
RECORDED 06/26/2015 09:58:33
Palm Beach County, Florida
AMT 2,965,238.56
Doc Stamp 20,757.10
Sharon R. Bock, CLERK & COMPTROLLER
Pgs 0591 - 593; (3pgs)

Parcel Identification No. 73-41-44-17-01-060-0030 & 73-41-44-17-01-060-0040

RECEIVED

By Planning and Zoning at 10:36 am, Jun 08, 2016

[Space Above This Line For Recording Data]

Warranty Deed

(STATUTORY FORM - SECTION 689.02, F.S.)

This Indenture made this 15th day of June, 2015 between Christopher L. Spire, Individually, and as Trustee of the Christopher L. Spire Living Trust, an unrecorded trust agreement dated June 11, 1998, as amended and restated; Christopher L. Spire, as Trustee of the Janet S. Spire Living Trust, an unrecorded trust agreement dated June 11, 1998, as amended, joined by his spouse, Laurie Joyce Leslie; and Laurie Joyce Leslie, Individually, and as Trustee of the Laurie Joyce Leslie Revocable Trust Agreement dated November 1, 2013, whose post office address is 14399 Rolling Rock Place, Wellington, FL 33414 of the County of Palm Beach, State of Florida, grantor*, and Christian C. Harris and Tracy R. Harris, husband and wife whose post office address is 14399 Rolling Rock Place, Wellington, FL 33414 of the County of Palm Beach, State of Florida, grantee*,

Witnesseth that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Palm Beach County, Florida, to-wit:

Lots 3 and 4, Block 60, SADDLE TRAIL PARK OF WELLINGTON, P.U.D., according to the map or Plat thereof, recorded in Plat Book 41, Page 103, Public Records of Palm Beach County, Florida.

and said grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

* "Grantor" and "Grantee" are used for singular or plural, as context requires.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Witness Name: D. P. DUFRESNE
Witness Name: LISA A. CTR
Witness Name: D. P. DUFRESNE
Witness Name: LISA A. CTR
Witness Name: D. P. DUFRESNE
Witness Name: LISA A. CTR

State of Florida
County of Palm Beach

The foregoing instrument was acknowledged before me this 15th day of June, 2015 by Christopher L. Spire, Individually, and as Trustee of the Christopher L. Spire Living Trust, an unrecorded trust agreement dated June 11, 1998, as amended and restated, who ☐ is personally known or ☒ has produced a driver's license as identification.

[Notary Seal]

State of Florida
County of Palm Beach

The foregoing instrument was acknowledged before me this 15th day of June, 2015 by Chrstopher L. Spire, as Trustee of the Janet S. Spire Living Trust, an unrecorded trust agreement dated June 11, 1998, as amended, who ☐ is personally known or ☒ has produced a driver's license as identification.

[Notary Seal]

Christopher L. Spire
Christopher L. Spire, Individually, and as Trustee of the Christopher L. Spire Living Trust, an unrecorded trust agreement dated June 11, 1998, as amended and restated

Christopher L. Spire
Christopher L. Spire, Individually, and as Trustee of the Janet S. Spire Living Trust, an unrecorded trust agreement dated June 11, 1998, as amended

Laurie Joyce Leslie
Laurie Joyce Leslie, Individually, and as Trustee of the Laurie Joyce Leslie Revocable Trust Agreement dated November 1, 2013

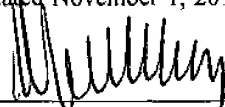
Notary Public
Printed Name: DONALD P. DUFRESNE
My Commission Expires Nov 12, 2018
Commission # FF 173424
Bonded through National Notary Assn.

Notary Public
Printed Name: DONALD P. DUFRESNE
My Commission Expires Nov 12, 2018
Commission # FF 173424
Bonded through National Notary Assn.

State of Florida
County of Palm Beach

The foregoing instrument was acknowledged before me this 15th day of June, 2015 by Laurie Joyce Leslie, Individually, and as Trustee of the Laurie Joyce Leslie Revocable Trust Agreement dated November 1, 2013, who ☐ is personally known or ☒ has produced a driver's license as identification.

[Notary Seal]


Notary Public

Printed Name

My Commission

