NEW YORK STATE ACKNOWLEDGEMENT

State of New York)
) *SS:*
County of_____)

On the_____day of _____, in the year_____, before me, the undersigned, personally appeared

NAME(S)

personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument

_____

Signature of Notary

Stamp or seal containing printed name, county of qualification of notary public and expiration date of notary commission