## TAV PORT ST LUCIE LLC

300 Main ST Stamford, CT 06901-3032

## **AGENT CONSENT FORM**

Parcel ID: 3323-947-0011-000-9	
BEFORE ME THIS DAY PERSONALLY APPEARE SWORN, DEPOSES AND SAYS THE FOLLOWIN	EDJACOB GOLLMANNHO BEING DULY IG: FOR TOV PORT ST LL
to submit a rezoning application ar to attend and represent me at all City, County and State permits for Furthermore, I hereby give consent	rision of Haley Ward, Inc. to act on my behalf, and all required material and documents, and meetings and public hearings pertaining all completion of the project indicated above. To the party designated above to agree to may arise as part of the approval of this
FURTHER AFFIANT SAYETH NOT.	450
The foregoing instrument was acknowled 2025, by Jacob Goldman Name of Pers	on Acknowledging) who is personally known
to me or who has produced	(type of identification) as
identification and who did (did not) take a	n oain.
Motary Signature	Owner's Signature
Suler Demolia	Jacob Goldman
Printed Name of Notary	Owner's Name
(Notary Seal)	700 S. R-semary Ave, Suite 204-680 Street Address
My commission expires	West Palm Beach FL 33401 City, State, Zip
	201-675-8497 jgoldman @twentyleter. Telephone / Email

SKYLER A DEMAIO

Notary Public, State of Connecticut

My Commission Expires June 30, 2029