*Blank Condominium Association, Inc.*

*C/O Florida Property Management Solutions, Inc.*

*12964 SW 133rd Court - Miami, Florida 33186*

*Phone: (786) 718-1622 – Fax: (786) 718-1623*

*Email:* [*info@myFPMS.com*](mailto:info@myFPMS.com)

**PROOF OF NOTICE AFFIDAVIT**

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The undersigned Secretary of the Association, being first duly sworn, deposes and says that the first notice of the annual membership meeting was mailed or hand delivered to each unit owner at the address last furnished to the Association in accordance with the requirements of Section §718.112(2)(d)(4)(a), Florida Statutes, at least sixty days prior to the annual meeting.

Dated this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 201\_\_\_\_\_

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

John Q. Sample, Secretary

The foregoing Affidavit was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 201\_\_\_, by John Q. Sample, the Secretary of Blank Condominium Association, Inc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

My Commission Expires: