## CERTIFICATE OF INCUMBENCY AND AUTHORITY

appointed, qualifithe date of this Cesignature appearing representative; that said Corporation and the DEPARTMENT instruments in cofor permits and simple such document, and and on behalf of said restricted by the by-laws, or of an Corporation is a the foregoing author DEPARTMENT OF TRAISAME, in whole TRANSPORTATION, STAIR revocation shall, executed or actions delivery to said of said said said company seal on all	position and signature ed and acting representificate the offices gopposite their nation the representative to execute and delive OF TRANSPORTATION, STANDER OF TRANSPORTATION IN THE COMPANY OF TRANSPORTATION IS NOT THE OFFICE OF THE TRANSPORTATION IN THE OFFICE	set opposite their set opposite their set opposite their series duly authorized for er any document between the opposite and the execution and instruments in connect prohibited by the finite of the full force and it is bound. I do fin full force and FLORIDA shall be entication, rescission seen delivered to so no such modificati effective with respect the foregoing authorized and the force of the representative,	that the person(s) duly elected, or ration and holds on r name, that the signature of the r and on behalf of en said Corporation II agreements and tation, application delivery of any ction therewith for or in any manner Incorporation, its ct to which said urther certify that effect, and said titled to rely upon or revocation of aid DEPARTMENT OF on, rescission or ct to any documents ority prior to the RIDA written notice revocation. hereby waives the and agrees to be
NAME(S) OF REPRESENTATIVE	TITLE(S) OF REPRESENTATIVE	POSITION(S) OF REPRESENTATIVE	SIGNATURE(S) OF REPRESENTATIVE
Gary E. Waterfield	Operations Mgr.	Operations Mgr.	
William Goetz	Regional VP	Regional VP	medito
IN WITNESS WHEREOF Corporation this	, I have hereunto set	my hand and affixed  19/12  (	the seal of said

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STATE OF FLOREDA COUNTY OF COUNTY OF COUNTY OF

BEFORE ME, the undersigned authority, this day personally appeared STANCTY WARF to me well known and known to me to be the Corporate Secretary of Corporate Corporate Secretary and Corporate instrument for the purposes therein mentioned and affixed the personal seal of said Corporation and affixed thereto the official seal of said Corporation.

WITNESS MY HAND AND OFFICIAL SEAL this \_\_\_\_\_ day of

(Notary Seal)

NOTARIAL SEAL GRACE M. SAPINOSA, Notary Public City of Philadelphia, Phila. County My Commission Expires July 14, 1994

Notary Public of

My Commission Expires