

## AFFIDAVIT OF AUTHORIZATION

FOR PETITION NUMBERS(S) \_\_\_\_\_

I, Paul Hiltz (print name), as Chief Executive Officer (title, if applicable) of Marco Island Hospital, Inc. (company, if applicable), swear or affirm under oath, that Marco Island Hospital (the "Company") is the Owner and that:

1. I have full authority, on behalf of the Company, to secure the approval(s) requested and to impose covenants and restrictions on the referenced property as a result of any action approved by the City of Marco Island in accordance with this application and the City Code's;
2. All answers to the questions in this application and any sketches, data or other supplementary matter attached hereto and made a part of this application are honest and true;
3. I, on behalf of the Company, have authorized the staff of City of Marco Island to enter upon the property during normal working hours for the purpose of investigating and evaluating the request made through this application; and that
4. The property will be transferred, conveyed, sold or subdivided subject to the conditions and restrictions imposed by the approved action.
5. The Company authorizes RWA, Inc. to act as the representative on behalf of the Company in any matters regarding this petition including 1 through 2 above.

### \*Notes

- If the applicant is a corporation, then it is usually executed by the corp. pres. or v. pres.
- If the applicant is a Limited Liability Company (L.L.C.) or Limited Company (L.C.), then the documents should typically be signed by the Company's "Managing Member."
- If the applicant is a partnership, then typically a partner can sign on behalf of the partnership.
- If the applicant is a limited partnership, then the general partner must sign and be identified as the "general partner" of the named partnership.
- If the applicant is a trust, then they must include the trustee's name and the words "as trustee."
- In each instance, first determine the applicant's status, e.g., individual, corporate, trust, partnership, and then use the appropriate format for that ownership.

**Under penalties of perjury, I declare that I have read the foregoing Affidavit of Authorization and that the facts stated in it are true.**

Marco Island Hospital, Inc.

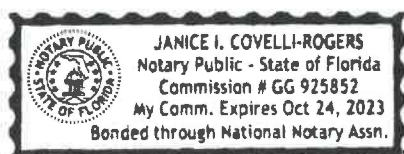
By: Paul Hiltz  
Paul Hiltz, as Chief Executive Officer

7/8/2021  
Date

### STATE OF FLORIDA COUNTY OF COLLIER

The foregoing instrument was sworn to (or affirmed) and subscribed before me on 7/8/2021 (date) by Paul Hiltz, as Chief Executive Officer of Marco Island Hospital, Inc., on behalf of the corporation, who is personally known to me or has produced \_\_\_\_\_ (type of identification) as identification.

### STAMP/SEAL



Janice I. Covelli-Rogers  
Signature of Notary Public