Deposition

State of Florida

County of				
In my capacity as a Notary Public of	the State of Florida, I ce	rtify that before me by mean	s of □physical presence	
or □online notarization, on the	day of	(month),	(year), at	
□ a.m. / □ p.m.,		(name of deponent) personally appeared		
before me and took an oath (or affirm	mation) for the purpose (of giving testimony in the ma	tter: (LIST DETAILS BELOW)	
□ Personally Known				
OR				
☐ Produced Identification				
Type of Identification Produced:		(Seal		
	Notary's Sig	gnature		
	Notary's No	ıme (printed, typed, or stamp	ed)	
☐ Remote Online Notarization via A	Audio - Video Communio	cation		
Additional Details (if applicable):				