

POWER OF ATTORNEY LETTER

To Whom It May Concern:

I, the undersigned, hereby appoint the individual named below as my true and lawful Attorney-in-Fact with full authority to act on my behalf and in my name in connection with all matters specified herein. This Power of Attorney is granted in accordance with the laws of Canada and is legally binding and enforceable.

Principal (Grantor) Information:

Full Name: _____
Address: _____
Phone/Email: _____

Attorney-in-Fact (Agent) Information:

Full Name: _____
Address: _____
Phone/Email: _____

Scope of Authority:

The Attorney-in-Fact is authorized to undertake the following acts on my behalf in Canada: - Manage, control, and dispose of my real and personal property; - Handle banking transactions, including deposits and withdrawals; - Represent me before government agencies and authorities; - Sign, execute, and deliver documents and contracts; - Obtain information, records, and documents; - Take any other lawful acts necessary to fulfill this Power of Attorney.

Duration and Revocation:

This Power of Attorney shall remain in full force and effect until revoked by me in writing. Any revocation shall not affect any actions taken by the Attorney-in-Fact prior to such revocation.

Governing Law:

This Power of Attorney shall be governed by and construed in accordance with the laws of Canada and the applicable provincial laws. The parties consent to the exclusive jurisdiction of Canadian courts.

Principal's Signature: _____

Attorney-in-Fact's Acceptance: _____

I, the Attorney-in-Fact, hereby accept the duties and responsibilities set forth above.

Attorney-in-Fact Signature: _____

Notary Public / Commissioner for Oaths:

Subscribed and sworn to (or affirmed) before me at _____, in the Province of
_____, this _____ day of _____, _____. Signature of Notary Public /
Commissioner for Oaths: _____ Printed Name:
_____ My commission expires:

Principal's Signature

Attorney-in-Fact Signature

Notary Public Signature

Signature: _____ Signature: _____ Signature: _____

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