RESOLUTION NO. 2003-<u>205</u>

A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA AUTHORIZING THE CLERK OF COURTS TO EXECUTE AND DELIVER THE ATTACHED AUTHORIZED SIGNATURE CERTIFICATION TO THE FLORIDA DIVISION OF TREASURY.

WHEREAS, the Florida Department of Financial Services Division of Treasury (the "Treasury") requires that St. Johns County complete and execute the attached authorized signature certification with regard to the County's withdrawal of funds from an escrow account administered by the Treasury with regard to a memorandum of agreement among St. Johns County, the Treasury and the Florida Department of Transportation that pertains to the County's performance of certain activities that are related to the NPDES Phase II Municipal Storm Sewer System (MS4) generic permit program, pursuant to the Federal Clean Water Act and Section 403.0885, F.S.

NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of St. Johns County that the following person:

Ben W. Adams, Jr., County Administrator

be identified on the attached Treasury Authorized Signature Certification form as persons that are empowered to issue instructions and enter into agreements/contracts with the Chief Financial, State of Florida concerning all cash, book entry, and security transactions on behalf of Saint Johns County, Florida, with regard to the above described MS4 project and that the form be executed by the Clerk of the Circuit Court and delivered to the Treasury.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, Florida this _______, 2003.

BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA

By: James E. Bryant, Chair

ATTEST: Cheryl Strickland, Clerk

Deputy Clerk

MAIL TO:

Division of Treasury Bureau of Collateral Management Hermitage Centre, 4th Floor 200 East Gaines Street Tallahassee, FL 32399-0345

My commission expires ______

	AUTHORIZED S	SIGNATURE CERTIFICATION				
The undersigned officer/official of _	59-60000825					
The undersigned officer official of _	(FEDERAL TAX II	(FEDERAL TAX ID NUMBER OF ORGANIZATION)				
	St. Johns Count					
		F ORGANIZATION)				
	4020 Lewis Spe	eedway				
	(COMPLETE ADD	DRESS OF ORGANIZATION)				
	St Augustine F	Florida 32084				
Financial Officer, State of Florida of Chief Financial Officer, State of Florida superseded by a new certification. A RESOLUTION AND MI	concerning all cash, book or ida shall accept any one NUTES ADOPTING BE USED TO VERI	powered to issue instructions and enter into agreements/contracts with the k-entry, and security transactions on behalf of this organization*. Once fill the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for these purposes until countermanded in writing the following signatures for th	iting or			
		SIGNATURE				
	NAME & TITLE	SIGNATURE				
Ben W. Adams, Jr., Co	ounty Administrator	Dow Colo				
 -						
25 32	No.					
*with regard to the Memorandum of Agreen	ent among FDOT, the Division	on of Treasury, and St. Johns County, Florida for Financial Project 21425617478				
Dated this 1 day of 1200 PM	<u>/////////////////////////////////////</u>	Cheryl Sheekland	-			
(SEAL OF ORGANIZ IF NONE HAVE FORM BELOV	ATION) V COMPLETED	(SIGNATURE) Cheryl Strickland, Clerk				
		(CLERK OF COURT)	•			
THIS CERTIFICATE MUST BE EXECU OFFICER WHO CERTIFIES HIS OWN ALSO CERTIFIES.	JTED BY AN OFFICER/OFI SIGNATURE WILL NOT B	FICIAL RESPONSIBLE FOR MAINTAINING THE ORGANIZATION'S RECORDS BE RECOGNIZED UNLESS ANOTHER OFFICER WHO HAS ACCESS TO THE RE	. AN CORDS			
		(ADDITIONAL SIGNATURE & TITLE)				
CHE	FORM BELOW MUST BE	COMPLETED IF THE ORGANIZATION HAS NO SEAL.)	-			
•						
Subscribed and sworn/certified to	before me, thisday of _	,20, at				
by the above-named person(s) as	described, whose identity (or r	the identity of each of whom) is well known or proved to me.				
(OFFICIAL STAMP	OR SEAL)					
`		(SIGNATURE OF NOTARY PUBLIC)				
		(ADDRESS)				

MAIL TO:

Division of Treasury Bureau of Collateral Management Hermitage Centre, 4th Floor 200 East Gaines Street

My commission expires ______

Tallahassee, FL 32399	<i>-</i> 0345			
	AUTHORIZE	D SIGNATURE CERT	IFICATION	
The undersigned officer/official of _	59-6000082:	5		
The midelinghed officer, extreme of _	(FEDERAL TA	X ID NUMBER OF ORGANIZATION	N)	
	St. Johns Co			
		E OF ORGANIZATION)		
	<u>4020 Lewis</u>			
		ADDRESS OF ORGANIZATION)		
	St. Augustin	e, Florida 32084	and enter into agreements/contracts	with the Chief
Financial Officer, State of Florida c Chief Financial Officer, State of Flo superseded by a new certification.	oncerning all cash, b rida shall accept any	ook-entry, and security transa one of the following signature	ons and enter into agreements/contracts actions on behalf of this organization*. The contracts of these purposes until countermanders of the countermander	ed in writing or
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	NAME & TITLE		SIGNATURE	
Ben W. Adams, Jr., Co	unty Administrat	or		
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*with regard to the Memorandum of Agreem	ant among PDO I, the Div	rision of fleasury, and St. John's Cour	ity, I forted for I manoral Troject at 1000	
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		(CLERK OF COURT)		
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		of, at		
by the above-named person(s) as	described, whose identity	(or the identity of each of whom) is v	vell known or proved to me.	
(OFFICIAL STAMP OR SEAL)			(2)	
·		(SIGNATURE OF NOTARY	PUBLIC)	
	_	(ADDRESS)		