RESOLUTION OF CERTIFICATE OF AUTHORITY ENTITY TYPE (Please Check One):

□ Other: _____

I, _____, a Manager, Member, or Owner of (APPLICANT) ______(full legal name of the "COMPANY") DO

HEREBY CERTIFY that I am a Manager, Member, or Owner of the Company who has the authority to act as an agent of the Company in executing this Certificate of Authority. I further certify that the following individuals have authority to execute and commit the Company to conditions, obligations, stipulations and undertakings contained in the City of Detroit Housing and Revitalization Department Housing Rehabilitation and Development Program Notice of Funding Availability ("NOFA") Application:

FURTHER, I CERTIFY that all necessary approvals by the Manager(s), Member(s), or Owner(s) of the Company have been obtained with respect to the execution of said NOFA Application, which is for the period of the application process.

IN WITNESS THEREOF, I have set my hand this _____ day of ______, 20____.

CORPORATE SEAL (if any)

Manager, Member, or Owner