



POWER OF ATTORNEY TO PREPARE OR TRANSMIT ELECTRONIC EXPORT INFORMATION

Know all men by these presents, that _____, (Name of U.S. Principal Party in Interest (USPPI)) _____ the USPPI organized and doing business under the laws of the State or (EIN Number) _____ Country of _____ of _____ and having an office and place _____ business _____ at _____ hereby authorizes (Address of USPPI)

SEKO Worldwide, LLC

of _____ (Address of Authorized Agent)

to act for and on behalf as a true and lawful agent and attorney of the U.S. Principal Party in Interest (USPPI) for, and in the name, place, and stead of the USPPI, from this date, in the United States either in writing, electronically, or by other authorized means to: act as authorized agent for export control, U.S. Census Bureau (Census Bureau) reporting, and U.S. Customs and Border Protection (CBP) purposes. Also, to prepare and transmit any Electronic Export Information (EEI) or other documents or records required to be filed by the Census Bureau, CBP, the Bureau of Industry and Security, or any other U.S. Government agency, and perform any other act that may be required by law or regulation in connection with the exportation or transportation of any goods shipped or consigned by or to the USPPI, and to receive or ship any goods on behalf of the USPPI.

The USPPI hereby certifies that all statements and information contained in the documentation provided to SEKO Worldwide, LLC and relating to exportation will be true and correct. Furthermore, the USPPI understands that civil and criminal penalties may be imposed for making false or fraudulent statements or for the violation of any United States laws or regulations on exportation.

This power of attorney is to remain in full force and effect until revocation in writing is duly given by the U.S. Principal Party in Interest and received by SEKO Worldwide, LLC.

IN WITNESS WHEREOF, _____ caused these (Full Name of USPPI/USPPI Company)

Presents to be sealed and signed:

Witness: _____ Signature: _____ Capacity: _____ Date: _____

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