EXPORTER/U.S. PRINCIPAL PARTY IN INTEREST POWER OF ATTORNEY

Exporter/USPPI Identification Number (EIN): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(REQUIRED)

**Know all men by these presents** that\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(Full Name of Corporation, LLC, Partnership, Sole Proprietorship or Individual)

the U.S. Principal Party-in-Interest (“USPPI”), organized and doing business under the laws of the United States in the State of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and having an office and place of business at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(Full Address of Grantor Account Location / USPPI)

hereby authorizes **Palos Garza Forwarding LLC** (Authorize Agent) its successors or assigns, to act for and on its behalf as a true and lawful agent and attorney of the USPPI, from this date, in the United States either in writing, electronically, or by other authorized means to:

Act as Authorize Agent for export control, U.S. Census Bureau reporting, and U.S. Customs and Border Protection 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 in connection with the exportation or transportation of any merchandise shipped or consigned by or to the USPPI and to receive or ship any merchandise on behalf of the USPPI.

The USPPI hereby certifies that all statements and information contained in the documentation provided to the Authorize Agent relating to the exportation or transportation are true and correct. Furthermore, the USPPI acknowledges that it is responsible for determining export licensing requirements and obtaining licensing authority. 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 the date revocation in writing is duly given by the USPPI and received by Forwarding Agent.

IN WITNESS WHEREOF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the USPPI caused these

(Full Name of Corporation, LLC, Partnership, Sole Proprietorship or Individual)

presents to be sealed and signed:

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(By signing, the signatory attests that he or she has authority to sign on behalf of the USPPI.)

Capacity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(President, Vice President, Treasurer, Corporate Secretary, CEO, CFO, CIO, or COO)

Operation Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_