

Alc Agent Authorization Letter

Samuel Green

25 Maple Avenue

Orlando, FL 32801

December 20, 2024

Alcohol Licensing Commission (ALC)

478 Licensing Plaza

Tallahassee, FL 32301

Subject: Authorization to Act as ALC Agent

Dear Sir/Madam,

I, Samuel Green, hereby authorize Laura White to act as my authorized ALC agent for the purpose of handling all matters related to the application, renewal, and management of alcohol licensing requirements on my behalf.

Details of the authorized agent are as follows:

- Name: Laura White
- Address: 152 Licensing Street, Orlando, FL 32805
- Contact Number: (321) 456-7890
- ID Proof: Passport #A765432109

Laura White is authorized to represent me in submitting applications, following up with the Alcohol Licensing Commission, and addressing any related documentation requirements. This authorization is valid from December 20, 2024, to December 31, 2025, unless revoked earlier in writing.

I confirm that I take full responsibility for all actions undertaken by the authorized agent within the scope of this authorization.

For further clarification, please contact me at (321) 987-6543 or samuel.green@example.com.

Thank you for your attention to this matter.

Sincerely,

Samuel Green

(Signature)

Enclosures:

1. Copy of Samuel Green's ID Proof
2. Copy of Laura White's ID Proof
3. Supporting documents (if applicable)