UNLIMITED POWER OF ATTORNEY

The effective date of this Unlimited Power of Attorney (the “Agreement”) is [DATE], made

**BETWEEN: [ATTORNEY NAME]** (the "Attorney"), a company organised and existing under the laws of the [COUNTRY], with its head office located at:

 [COMPLETE ADDRESS]

**AND: [YOUR COMPANY NAME]** (the "Client"), a company organised and existing under the laws of the [COUNTRY], with its head office located at:

 [YOUR COMPLETE ADDRESS]

**RECITALS**

BE IT KNOWN, that Client, do hereby grants an Unlimited Power of Attorney to Attorney, as its attorney-in-fact.

**TERMS**

1. The attorney-in-fact shall have full powers and authority to do and undertake all acts on Client’s behalf that Client could do personally including but not limited to the right to sell, buy, lease, mortgage, assign, rent or dispose of any real or personal property; the right to execute, accept, undertake and perform all contracts in Client’s name; the right to deposit, endorse, or withdraw funds to or from any of Client’s bank accounts or safe deposit box; the right to initiate, defend, commence or settle legal actions on Client’s behalf; and the right to retain any accountant, attorney or other advisor deemed necessary to protect Client’s interests relative to any foregoing unlimited power.
2. The attorney-in-fact hereby accepts this appointment subject to its terms and agrees to act and perform in a said fiduciary capacity consistent with its best interests as Attorney in his best discretion deems advisable.
3. This power of attorney may be revoked by Client at any time, provided any person relying on this power of attorney shall have full rights to accept the authority of the attorney-in-fact until *in re*ceipt of actual notice of revocation.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the date first above written.

ATTORNEY CLIENT

Authorised Signature Authorised Signature

Print Name and Title Print Name and Title

**ACKNOWLEDGEMENT**

State of [STATE]

County of [COUNTY]

On [DATE] before me, [NAME OF NOTARY], notary, personally appeared [NAME OF PERSON(S) INVOLVED], personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorised capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal.

Signature Notary

(*Seal*)