

(Please put this on you company letterhead)

**POWER OF ATTORNEY
EXPORTER (U.S. PRINCIPAL PARTY IN INTEREST) (USPPI)**

Known all Men by these presents, that _____, The USPPI
(Name of the U.S. Principal Party in Interest)

Organized and doing business under the laws of the State or Country of _____

And having an office and place of business at _____
(Address of USPPI)

Hereby authorizes **Gulfport Logistics, Inc.**, the Forwarding Agent of 11103 McCracken Circle Ste C, Cypress, TX 77429 USA

to act for and on its behalf as a true and lawful agent and attorney of the U.S. Principal Party in Interest for and in the name, place and stead of the U.S. Principal Party in Interest, from this date, in the United States either in writing, electronically, or by other authorized means to:

Act as Forwarding Agent for Export Control, Census Reporting and Customs purposes. File any Automated Export System (AES) Electronic Export Information (EEI) or other documents or to perform any act which may be required by law or regulation in connection with the exportation or transportation of any merchandise shipped or consigned by or to the U.S. Principal Party in Interest and to receive or ship any merchandise on behalf of the U.S. Principal Party in Interest.

The U.S. Principal Party in Interest hereby certifies that all statements and information contained in the documentation provided to the Forwarding Agent related to exportation are true and correct. Furthermore, the U.S. Principal Party in Interest 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 **Gulfport Logistics, Inc.**

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

Presents to be sealed and signed:

Witness: _____ Signature: _____

Capacity: _____ Print your name: _____

Date: _____ (USPPI) EIN or Tax ID No. _____