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I HEREBY VERTIFY THAT THIS PLAN, SPECIFICATION, OR REPORT WAS PREPARED BY ME OR UNDER MY DIRECT SUPERVISION, AND THAT I AM A DULY LICENSED ARCHITECT UNDER THE LAWS OF THE STATE OF MINNESOTA.

PRINTED NAME: WILLIAM B. DOERR

SIGNATURE: —

DATE: __ MN LICENSE #: 27051

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YORKDALE SHOPPES 6809 YORK AVE. EDINA, MN.

DATE: 8-4-10 SCALE: AS SHOWN

JOB NO.

DRAWN BY: DOERR

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