(Rev. January 2021) Department of the Treasury

Power of Attorney and Declaration of Representative

	OMB No. 1545-0150 For IRS Use Only						
	Received by:						
	Name						
	Telephone						
	Function						
	Date / /						

Internal Revenue Service Go to www.irs.gov/Form2848 fo	r instructions ar	nd the latest informa	ation.	Nam	ie	
Part I Power of Attorney Caution: A separate Form 2848 must be completed for each	Tele	ohone				
for any purpose other than representation before the IRS.	Fund	ction				
Taxpayer information. Taxpayer must sign and date this form on page.	Date	, ,				
Taxpayer name and address	Duit	, ,				
HYG HOMES LLC		Taxpayer identification number(s)				
84 NE LOOP 410 STE 242	30-	-1268670				
SAN ANTONIO TX 78216	Day	Daytime telephone number Plan r			r (if applicable)	
hereby appoints the following representative(s) as attorney(s)-in-fact:						
2 Representative(s) must sign and date this form on page 2, Part II.		OAFAL				
Name and address		CAF No PTIN				
SARA CRAWFORD			P002499			
84 NE LOOP 410 STE 252			•	1 4355		
San Antonio TX 78216 Check if to be sent copies of notices and communications	Check if ne		Telephone	L1−4355 No □	Fax No.	
Name and address	Office in the					
Name and address		CAF No				
		T 1 1 11				
		Fax No.				
Check if to be sent copies of notices and communications	Check if ne		Telephone	No.	Fax No.	
Name and address		CAF No.				
		PTIN				
		Telephone No.				
		Fax No.				
(Note: IRS sends notices and communications to only two representatives.)	Check if ne	w: Address	Telephone	No.	Fax No.	
Name and address		CAF No			<u> </u>	
		PTIN				
		Telephone No.				
		Fax No.				
(Note: IRS sends notices and communications to only two representatives.)			Telephone	No.	Fax No.	
to represent the taxpayer before the Internal Revenue Service and perform t Acts authorized (you are required to complete line 3). Except for th	-		my represe	ntativo(s) to r	oceive and	
inspect my confidential tax information and to perform acts I can perfor representative(s) shall have the authority to sign any agreements, cons representative to sign a return).	rm with respect to	the tax matters desc	ribed belov	v. For exampl	e, my	
Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift	,	To Found Northern Works				
Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec.				/ear(s) or Period(s) (if applicable)		
4980H Shared Responsibility Payment, etc.) (see instructions)	(1040, 941,	(1040, 941, 720, etc.) (if applicable)		(see instructions)		
INCOME TAX	1120		202	22		
4 Specific use not recorded on the Centralized Authorization File (CAF). If the powe	er of attorney is for a s	pecific use	not recorded	on	
CAF, check this box. See Line 4. Specific Use Not Recorded on CAF					_	
5a Additional acts authorized. In addition to the acts listed on line 3 about						
_		ntermediate Service P		ŭ	,	
Authorize disclosure to third parties; Substitute or ac	dd representative(s); Sign a ref	turn;			
Other acts authorized:						

b	Specific acts not authorized. My representative(s) is	(are) not authorized to endorse or otherwi	se negotiate any check (including directing or			
	accepting payment by any means, electronic or otherw	ise, into an account owned or controlled	by the representative(s) or any firm or other			
	entity with whom the representative(s) is (are) associate	ed) issued by the government in respect	of a federal tax liability.			
	List any other specific deletions to the acts otherwise a	authorized in this power of attorney (see in	nstructions for line 5b):			
6	Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of					
	attorney on file with the Internal Revenue Service for the	same matters and years or periods cove	red by this form. If you do not want to			
	revoke a prior power of attorney, check here					
	YOU MUST ATTACH A COPY OF ANY POWI	ER OF ATTORNEY YOU WANT TO	O REMAIN IN EFFECT.			
	of attorney even if they are appointing the same representative (or designated individual, if a taxpayer, I certify I have the legal authority to execute the IF NOT COMPLETED, SIGNED, AND DAT	applicable), executor, receiver, administratistic form on behalf of the taxpayer. ED, THE IRS WILL RETURN THIS				
	Carlos Garza	2/24/2023				
Signature <i>CEGH</i>		Date	Title (if applicable)			
		HYG HOMES LLC				
	Print Name	Print name of ta	Print name of taxpayer from line 1 if other than individual			
Part	II Declaration of Representative					
Under	penalties of perjury, by my signature below I declare that	:				
• I ar	n not currently suspended or disbarred from practice, or	ineligible for practice, before the Internal	Revenue Service;			

- I am subject to regulations in Circular 230 (31 CFR, Subtitle A, Part 10), as amended, governing practice before the Internal Revenue Service;
- I am authorized to represent the taxpayer identified in Part I for the matter(s) specified there; and
- I am one of the following:
 - a Attorney a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - b Certified Public Accountant a holder of an active license to practice as a certified public accountant in the jurisdiction shown below.
 - c Enrolled Agent enrolled as an agent by the IRS per the requirements of Circular 230.
 - **d** Officer a bona fide officer of the taxpayer organization.
 - e Full-Time Employee a full-time employee of the taxpayer.
 - Family Member a member of the taxpayer's immediate family (spouse, parent, child, grandparent, grandchild, step-parent, step-child, brother, or sister).
 - g Enrolled Actuary enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the IRS is limited by section 10.3(d) of Circular 230).
 - h Unenrolled Return Preparer Authority to practice before the IRS is limited. An unenrolled return preparer may represent, provided the preparer (1) prepared and signed the return or claim for refund (or prepared if there is no signature space on the form); (2) was eligible to sign the return or claim for refund; (3) has a valid PTIN; and (4) possesses the required Annual Filing Season Program Record of Completion(s). **See Special Rules and Requirements for Unenrolled Return Preparers** in the instructions for additional information.
 - **k** Qualifying Student or Law Graduate receives permission to represent taxpayers before the IRS by virtue of his/her status as a law, business, or accounting student, or law graduate working in a LITC or STCP. See instructions for Part II for additional information and requirements.
 - r Enrolled Retirement Plan Agent enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THE POWER OF ATTORNEY. REPRESENTATIVES MUST SIGN IN THE ORDER LISTED IN PART I, LINE 2.

Note: For designations d-f, enter your title, position, or relationship to the taxpayer in the "Licensing jurisdiction" column.

Designation - Insert above letter (a-r).	Licensing jurisdiction (State) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable)	Signature	Date

EEA Form **2848** (Rev. 1-2021)

eSignature - Certificate of Completion

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Signatures: 1 Initials: 1

Signature originator: **Dulce Valadez (dulce@correacrawford.com)**

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Signers

Signer: carlosegarza@gmail.com

carlosegarza@gmail.com

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Signature

Carlos Garza

Carlos Garza

Initials CEGH