

BOSER construction, in c

Commercial | Medical | Institutional

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I hereby certify that this plan, specification or report was prepared by me or under my direct supervision & that I am a duly Licensed Architect under the laws of the

Signature: ________Murray A. Ma

State of Minnesota

License No.: 18686

Date: 04/12/2019

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Project No: 1662
Project Manager: DAS
Drawn By: SG
Date: 04/12/

ate Description



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New Facility For

Tri-County Humane Society

NOT

St. Cloud, MN

First Floor Plan

A2.