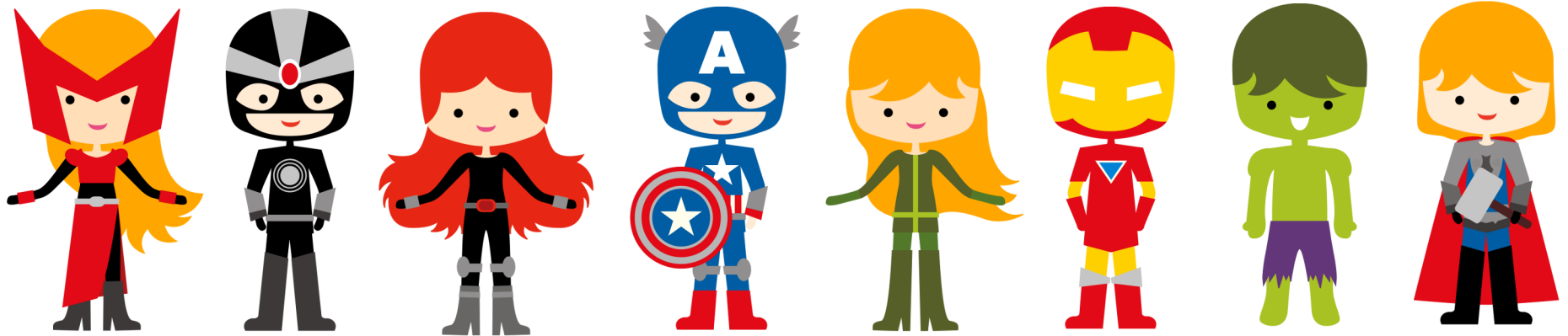


DATE:

TIME:

PLACE:





# OFFICIAL SUPER HERO

**SUPER HERO NAME**

**SUPER POWER**

**REAL NAME**

THIS CERTIFICATE VERIFIES THAT THE INDIVIDUAL MENTIONED ABOVE  
HAS COMPLETED ALL THE NECESSARY TASKS AND COURSES TO  
BECOME AN OFFICIAL SUPER HERO.

# CONGRATULATIONS