

CERTIFICATE OF TRUST

This Certificate of Trust is executed this _____ day of [Month], [Year], in accordance with applicable state trust laws, including but not limited to California Probate Code Section 18100.5, Texas Property Code Section 114.086, Florida Statutes Section 736.1017, and Ohio Revised Code Section 5810.18, where applicable, to attest to the existence and key terms of the trust described herein.

1. TRUST IDENTIFICATION

The trust to which this Certificate relates is known as:

The Trust: _____

Date of Trust Establishment: _____

2. SETTLOR IDENTIFICATION

The Settlor (also known as Grantor or Trustor) of the Trust is:

The Settlor: _____

Mailing Address:

Street Address: _____

City: _____

State: _____

Zip Code: _____

3. TRUSTEE IDENTIFICATION AND AUTHORITY

The currently serving Trustee authorized to act on behalf of the Trust is:

The Trustee: _____

Mailing Address:

Street Address: _____

City: _____

State: _____

Zip Code: _____

The Trustee is fully authorized under the terms of the Trust to manage, sell, convey, pledge, mortgage, lease, or otherwise dispose of any real or personal property held in the Trust, and to conduct all financial,

banking, and business transactions on behalf of the Trust.

4. SUCCESSOR TRUSTEE

In the event the current Trustee ceases to serve due to death, resignation, incapacity, or any other reason, the designated Successor Trustee is:

The Successor Trustee: _____

Mailing Address:

Street Address: _____

City: _____

State: _____

Zip Code: _____

5. REVOCABILITY AND AMENDMENT

The Trust is: [insert "revocable" or "irrevocable"].

The power to revoke or amend the Trust, if any, is held exclusively by: [insert "the Settlor" or "not applicable"].

6. TAXPAYER IDENTIFICATION NUMBER

The taxpayer identification number associated with the Trust is: [insert "the Settlor's Social Security Number" or "Employer Identification Number (EIN) " followed by the number or a placeholder for it].

7. TITLE TO TRUST ASSETS

Title to Trust assets should be taken in the following manner:

_____, Trustee of the _____, dated _____.

8. NO REVOCATION OR AMENDMENT

The Trust has not been revoked, modified, or amended in any manner that would cause the representations contained in this Certificate of Trust to be incorrect. This Certificate is being signed by the currently serving Trustee.

9. RELIANCE BY THIRD PARTIES

This Certificate of Trust is executed for the purpose of confirming the existence of the Trust and the authority of the Trustee to act on behalf of the Trust. Any transaction entered into by the Trustee on behalf of the Trust with a third party shall be fully binding upon the Trust. Third parties may rely on this Certificate as being true and correct until they receive written notice of amendment or revocation.

TRUSTEE

Signature: _____

Print Name: _____

Date: _____

Address:

Street Address: _____

City: _____

State: _____

Zip Code: _____