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APN 19-140-740

RECORDING REQUESTED BY  
C.Christensen, Attorney at Law

WHEN RECORDED MAIL TO

Name: DAVID O. SMITH AND LYNDAKATE SMITH

Street 2156 Silver Hollow Ct.  
Address:

City: San Jose

State/Zip: CA 95138-2327

SPACE ABOVE THIS LINE FOR RECORDER'S USE

# CERTIFICATION OF TRUSTEE

(California Probate Code Section 18100.5)

The Undersigned being of legal age, declares under penalty of perjury:

1. Declarant(s) certifies the existence of the following described Trust and states that he/she/they are all of the current Trustees.

Name of Trust: THE SMITH FAMILY 2000 TRUST  
Date of Trust: June 16, 2000  
Trustor/Settlor(s): David O. Smith and Lynda Kate Smith  
Original Trustee(s): David O. Smith and Lynda Kate Smith  
Trust Identification No. (Employer Identification No. or Social Security No.):                     -2272

2. Declarant(s) state(s) that the Trust is in full force and effect and has not been revoked, terminated, or otherwise amended in any manner which would cause the representation in this Certification to be incorrect. The name(s) of all persons who have any power to revoke the Trust are: David O. Smith and Lynda Kate Smith

3. Declarant(s) state(s) that the following named Trustee(s) is/are fully empowered to act for said Trust and is/are properly exercising his/her/their authority under said Trust in negotiating for, contracting for, and executing the document(s) attached hereto, or set forth below, and that no Trustee(s) other than the following named Trustees are necessary under the Trust to sign said document(s):

Name of Trustee(s) Authorized to Sign: David O. Smith and Lynda Kate Smith  
Nature of Document(s): \_\_\_\_\_

4. Declarant(s) states(s) that to the best of his/her/their knowledge, there are no claims, challenges of any kind or causes of action alleged, contesting or questioning the validity of the Trust or the Trustee's authority to act for the Trust.

5. This Declaration/Certification is prepared and executed pursuant to California Probate Code Section 18100.5.  
Signed under penalty of perjury, this 1st day of August, 2000.

STATE OF CALIFORNIA  
COUNTY OF Santa Clara

On August 1, 2000, before me, the undersigned, a Notary Public in and for said State, personally appeared David O. Smith and Lynda Kate Smith personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS, my hand and official seal.

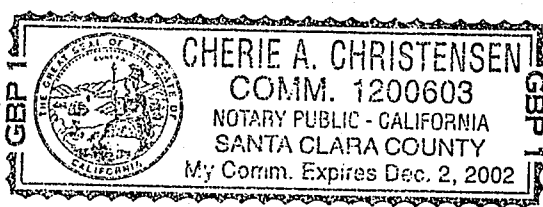
Cherie A. Christensen  
Notary Public in and for said County and State

Cherie A. Christensen  
(Notary's name must be typed or legibly printed.)

(FOR NOTARY STAMP OR SEAL)

David O. Smith  
David O. Smith

Lynda Kate Smith  
Lynda Kate Smith



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REQUESTED BY  
**STEWART TITLE of DOUGLAS COUNTY**  
IN OFFICIAL RECORDS OF  
DOUGLAS COUNTY, NEVADA

2001 MAR -5 PM 3:17

LINDA SLATER  
RECORDER

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