

58

DOC # 0644841  
05/20/2005 08:11 AM Deputy: KLJ  
**OFFICIAL RECORD**  
Requested By:  
U S DEEDS

Assessor's Parcel Number: 1318-15-715-021

Recording Requested By:

Name: James K. Hales, Esq.

Address: PO Box 2080

City/State/Zip Minden, NV 89423

Real Property Transfer Tax: \_\_\_\_\_

Douglas County - NV  
Werner Christen - Recorder  
Page: 1 Of 20 Fee: 58.00  
BK-0505 PG- 9075 RPTT: 0.00



Certificate of Incumbency  
(Title of Document)

✓ U.S. Deeds  
213 Brentshire Dr  
Brandon FL 33511

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fee applies)

*This cover page must be typed or legibly hand printed.*

57-  
R

**CERTIFICATE OF INCUMBENCY,  
CERTIFICATE OF TRUST,  
ABSTRACT OF TRUST POWERS  
AND DESIGNATION OF SUCCESSOR TRUSTEES**

I, Joyce M. Wrinkle, hereby declare:

1. That I am a settlor and original trustee of THE RICHARD K. WRINKLE AND JOYCE M. WRINKLE TRUST AGREEMENT OF 1985, and those certain sub trusts created under the above-named Trust, specifically: The Richard K. Wrinkle and Joyce M. Wrinkle Trust Agreement of 1985 dated April 22, 1985, as amended and restated April 6, 2001; The Wrinkle Survivor's Trust UTD April 22, 1985, established July 21, 2003; The Wrinkle Credit Shelter Trust UTD April 22, 1985, established July 21, 2003.

2. That Richard K. Wrinkle is now deceased. A certified copy of his Certificate of Death is attached as Exhibit "A".

3. That I am unwilling to serve as trustee. Attached as Exhibit "B" is a copy of my resignation.

4. That Wells Fargo Bank has resigned as trustee of the Trust. Its resignation is attached hereto as Exhibit "C".

5. That under the terms of the Wrinkle Trust, I am authorized to continue as trustee upon the passing of Richard K. Wrinkle. However, by my resigning, Michael R. Winkle is named as a

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*Prepared by*

**ROWE & HALES, LLP**

P.O. Box 2080, Minden, Nevada, 89423 • Telephone (775) 782-8141



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successor trustee. That attached as Exhibit "D" is the Acceptance of Nomination as Successor Trustee signed by Michael R. Winkle.

6. That as incumbent trustee, Michael R. Winkle is vested with the full powers concerning the management of the trust property.

7. That attached as Exhibit "E" is a true and correct copy of the pages from the trust instrument which define and set forth the powers and authorities of the trustee. These powers are in addition to any powers now or hereafter conferred under the laws of the State of Nevada.

8. For the purpose of inducing all persons, organizations, corporations and entities including but not limited to any physician, hospital, bank, broker, custodian, insurer, lender, title company, transfer agent, taxing authority, governmental agency, or party to act in reliance upon this Certificate of Incumbency, Certificate of Trust, Abstract of Trust Powers and Designation of Successor Trustees, I hereby represent, warrant and agree that:

(a) If any trust identified in paragraph 1 is revoked or amended for any reason, I, my estate, my heirs, successors and assigns will hold any person, organization, corporation or entity (hereinafter referred to in the aggregate as "Person") harmless from any loss suffered, or liability incurred by such Person in acting in accordance with the instructions of the trustee acting under the trust agreement or this Certificate of Incumbency, Certificate of Trust, Abstract of Trust Powers and Designation of Successor Trustees prior to the receipt by such Person of actual notice of any such revocation or amendment.

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*Prepared by*

**ROWE & HALES, LLP**

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(b) The powers conferred on the trustee by the trust agreement as set out in this Certificate of Incumbency, Certificate of Trust, Abstract of Trust Powers and Designation of Successor Trustees may be exercised by the trustee alone and the trustee's signature or acts under the authority granted in the trust agreement may be accepted by Persons as fully authorized by me and with the same force and effect as if I was personally present, competent, and acting on my own behalf. Consequently, all acts lawfully done by the trustee hereunder are done with my consent and shall have the same validity and effect as if I was personally present and personally exercised the powers myself, and shall inure to the benefit of and bind me and my heirs, assigns and personal representatives.

(c) No Person who acts in reliance upon this Certificate of Incumbency, Certificate of Trust, Abstract of Trust Powers and Designation of Successor Trustees or any representations my trustee may make as to: the fact that the trustee's powers are then in effect, the scope of the trustee's authority granted under the trust agreement, my competency at the time the trust agreement is executed, the fact that the trust agreement has not been revoked, or the fact that the trustee continues to serve as trustee, shall incur any liability to me, my estate, my heirs or assigns for permitting the trustee to exercise any such authority.

9. That I declare under penalty of perjury that the foregoing statements are true and correct and that THE RICHARD K. WRINKLE AND JOYCE M. WRINKLE TRUST

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*Prepared by*

**ROWE & HALES, LLP**

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**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY**  
**PUBLIC HEALTH DEPARTMENT**

Exhibit A

**CERTIFICATE OF DEATH**

3200301005025

1. NAME OF DECEDENT -- FIRST (Given)		2. MIDDLE		3. LAST (Family)		4. DATE OF BIRTH (month/day)		5. AGE YRS		6. SEX	
RICHARD		KUEST		WRINKLE		04/29/1925		78		M	
AKA ALSO KNOWN AS -- include full AKA (FIRST, MIDDLE, LAST)											
9. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER		11. EVER IN U.S. ARMED FORCES?		12. MARITAL STATUS (in Time of Death)		7. DATE OF DEATH (month/day)		8. HOUR (24 Hours)	
CA		-0038		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		MARRIED		07/21/2003		0332	
13. EDUCATION -- Highest Level Degree (see worksheet on back)		14. WAS DECEDENT SPANISH/SPIANIC/LATINO? (If yes, see worksheet on back)		15. DECEDENT'S RACE -- Up to 3 races may be listed (see worksheet on back)							
HS GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO		WHITE							
17. USUAL OCCUPATION -- Type of work for most of life. DO NOT USE RETIRED				18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, retail collection, employment agency, etc.)				19. YEARS IN OCCUPATION			
SAFETY MANAGER				PARCEL DELIVERY				28			
29. DECEDENT'S RESIDENCE (Street and Number (if location))											
1000 E. 14TH ST. #346											
21. CITY		22. COUNTY/PROVINCE		23. ZIP CODE		24. YEARS IN COUNTY		25. STATE/FOREIGN COUNTRY			
SAN LEANDRO		ALAMEDA		94577		78		CA			
26. INFORMANT'S NAME, RELATIONSHIP											
JOYCE WRINKLE (WIFE)											
27. INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state, ZIP)											
1000 E. 14TH ST. #346, SAN LEANDRO, CA 94577											
28. NAME OF SURVIVING SPOUSE -- FIRST		29. MIDDLE		30. LAST (Given Name)							
JOYCE		MAR		RICHARDSON							
31. NAME OF FATHER -- FIRST		32. MIDDLE		33. LAST		34. BIRTH STATE					
DAVID		DEAN		WRINKLE		TN					
35. NAME OF MOTHER -- FIRST		36. MIDDLE		37. LAST		38. BIRTH STATE					
CLARA		KUEST		KUEST		OH					
39. DISPOSITION DATE (month/day)											
07/25/2003											
40. PLACE OF DISPOSITION											
AT SEA, OFF THE COAST OF BAY AREA COUNTY											
41. TYPE OF DISPOSITION											
CR/SEA											
42. SIGNATURE OF REGISTRAR											
[Signature]											
43. LICENSE NUMBER											
44. NAME OF FUNERAL ESTABLISHMENT											
NEPTUNE SOCIETY, CA											
45. LICENSE NUMBER											
FD1397											
46. SIGNATURE OF LOCAL REGISTRAR											
[Signature]											
47. DATE (month/day)											
07/25/2003											
101. PLACE OF DEATH											
OWN RESIDENCE											
102. HOSPITAL, SPECIAL CARE CENTER, NURSING HOME, OR OTHER INSTITUTION (SPECIFY ONE)											
103. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location)											
ALAMEDA 1000 E. 14TH ST. #346											
104. CITY											
SAN LEANDRO											
107. CAUSE OF DEATH											
IMMEDIATE CAUSE (A) (Final diagnosis condition resulting in death)											
CONGESTIVE HEART FAILURE											
108. BIOPSY PERFORMED?											
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO											
109. AUTOPSY PERFORMED?											
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO											
110. LISTED IN DETERMINING CAUSE?											
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO											
111. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT LISTED AS CAUSE OF DEATH (See CA 104)											
INSULIN DEPENDENT DIABETES MELLITUS											
113. WAS OPERATION PERFORMED FOR ANY CONDITION LISTED IN 111? (Specify type of operation and date)											
NO											
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED											
115. SIGNATURE AND TITLE OF IDENTIFIER											
[Signature]											
116. LICENSE NUMBER											
G061152											
117. DATE (month/day)											
07/24/2003											
118. TYPE OF DEATH (See CA 107) (Specify name, address, ZIP CODE)											
M. O'BRIEN, MD, 20100 LAKE CHABOT RD., CASTRO VALLEY, CA 94546											
119. I CERTIFY THAT MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED											
120. INJURED AT WORK?											
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK											
121. INJURY DATE (month/day)											
122. HOUR (24 Hours)											
123. PLACE OF INJURY (i.e., home, construction site, street, etc.)											
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)											
125. LOCATION OF INJURY (Street and Number (if location), and city, and ZIP)											
126. SIGNATURE OF CORONER/DEPUTY CORONER											
[Signature]											
127. DATE (month/day)											
128. TYPE NAME, TITLE OF CORONER/DEPUTY CORONER											

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STATE REGISTRAR: A B C D E FAX AUTH: 83919 \*000365812\*

**CERTIFIED COPY OF VITAL RECORDS**

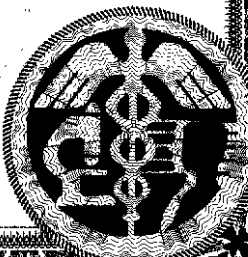
STATE OF CALIFORNIA }  
COUNTY OF ALAMEDA } ss

This is a true and exact reproduction of the document officially registered, and filed with the Alameda County Health Care Services Agency.

DATE ISSUED: 07/28/2003

*[Signature]*  
HEALTH OFFICER AND LOCAL REGISTRAR  
ALAMEDA COUNTY, CALIFORNIA

This copy not valid unless prepared on engraved border displaying date and signature of Registrar.







**ACKNOWLEDGMENT OF RECEIPT  
AND ACCEPTANCE OF REMOVAL**

*The Richard K. Wrinkle and Joyce M. Wrinkle Trust Agreement of 1985  
dated April 22, 1985, as amended and restated April 6, 2001  
The Wrinkle Survivor's Trust UTD April 22, 1985, established July 21, 2003  
The Wrinkle Credit Shelter Trust UTD April 22, 1985, established July 21, 2003*

Wells Fargo Bank hereby acknowledges receipt of the *Resignation of Co-Trustee, Removal of Co-Trustee and Appointment of Successor Trustees*, signed by Joyce M. Wrinkle on May 3, 2004. Wells Fargo Bank hereby accepts its removal as Co-Trustee of the ~~Richard K. Wrinkle and Joyce M. Wrinkle Trust Agreement of 1985 dated April 22, 1985, as amended and restated April 6, 2001~~, the Wrinkle Survivor's Trust UTD April 22, 1985, established July 21, 2003, and the Wrinkle Credit Shelter Trust UTD April 22, 1985, established July 21, 2003.

Dated: 4-14, 2004<sup>5</sup>

WELLS FARGO BANK, N.A.

By: Susan Seidel

Its: Assistant Vice President  
Susan Seidel

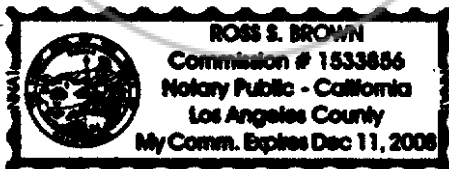
State of California )  
County of Los Angeles ) ss.

On April 14, 2004, before me, Ross S. Brown,  
Notary Public, personally appeared Susan Seidel.

X personally known to me  
proved to me on the basis of satisfactory evidence

to be the person whose name is subscribed to the within instrument, and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity on behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.



Ross S. Brown  
Notary Public, State of California

### ACCEPTANCE OF NOMINATION AS SUCCESSOR TRUSTEE

I, Michael R. Wrinkle, have received notice of the resignation of Joyce M. Wrinkle as Trustee of the following named Trusts: The Richard K. Wrinkle and Joyce M. Wrinkle Trust Agreement of 1985 dated April 22, 1985, as amended and restated April 6, 2001; The Wrinkle Survivor's Trust UTD April 22, 1985, established July 21, 2003; The Wrinkle Credit Shelter Trust UTD April 22, 1985, established July 21, 2003.

I hereby accept Joyce M. Wrinkle's nomination of me as successor trustee of the above-named Trusts, and do hereby undertake and assume all responsibility to function as the Trustee of the above-named Trusts. This acceptance is effective as of May 3, 2004, regardless of the actual date of my signature on this document.

Dated this 16<sup>th</sup> day of March, 2005.

Michael R. Wrinkle  
Michael R. Wrinkle

STATE OF Virginia )  
                                       ) : ss.  
COUNTY OF Fairfax )

On this 16 day of March, 2005, before me, the undersigned, a Notary Public in and for said County and State, personally appeared Michael R. Wrinkle,  
 personally known to me  
 proved to me on the basis of satisfactory evidence  
to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacity, and that by her signature on the instrument the

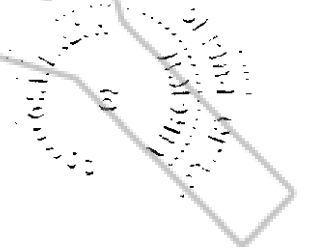
person, or the entity upon behalf of which the person acted, executed the instrument.

Witness my hand and official seal.

*Karen M. Meyer*  
SIGNATURE OF NOTARY

*My Commission Expires:  
March 31, 2006*

**SEAL**



COPY



Exhibit E

RECORDING REQUESTED BY:

RICHARD K. WRINKLE  
JOYCE M. WRINKLE

WHEN RECORDED MAIL TO:

RICHARD K. WRINKLE, TRUSTEE  
JOYCE M. WRINKLE, TRUSTEE  
WELLS FARGO BANK, TRUSTEE  
C/O LAW OFFICES OF RICHARD B. JOHNSON  
21550 FOOTHILL BOULEVARD, SUITE 3  
HAYWARD, CA 94541-2111

THIRD AMENDMENT DATED APRIL 6, 2001,  
TO THE RICHARD K. WRINKLE AND JOYCE M. WRINKLE  
TRUST AGREEMENT OF 1985

We, RICHARD K. WRINKLE and JOYCE M. WRINKLE, husband and wife, hereby amend THE RICHARD K. WRINKLE AND JOYCE M. WRINKLE TRUST AGREEMENT OF 1985, by deleting each and every provision of said trust agreement and any amendments thereto and by restating said trust agreement as follows:

DECLARATION AND TRUST INSTRUMENT

We, RICHARD K. WRINKLE and JOYCE M. WRINKLE, husband and wife, declare as follows:

I. Trust Name

This trust shall be known as THE RICHARD K. WRINKLE AND JOYCE M. WRINKLE TRUST AGREEMENT OF 1985.

II. Family Members

We have two children, namely, MICHAEL R. WRINKLE and RICHARD D. WRINKLE. We have no predeceased children.

///

THIRD AMENDMENT DATED APRIL 6, 2001, TO THE RICHARD K. WRINKLE AND JOYCE M. WRINKLE TRUST AGREEMENT OF 1985, PAGE 1

to his spouse and children as they shall decide.

K. Ultimate Disposition:

If at the time of the death of the Surviving Spouse, or at any later time before full distribution of the Trust estate(s), the Trustors and all their issue are deceased and no other disposition of the property is directed in this instrument, the Trust estate or the portion of it then remaining shall thereupon be distributed one-half (1/2) to the heirs of husband and one-half (1/2) to the heirs of wife.

VI. Trustee

A. For the trust created herein of which we are the primary beneficiaries, we name ourselves, RICHARD K. WRINKLE and JOYCE M. WRINKLE, and WELLS FARGO BANK as co-trustees, provided however, that with regard to any part of the what is now 111,776 shares of United Parcel Service - Class A restricted stock and any part of the what is now 20,000 shares of Overseas Partnership Ltd. in the trust, said WELLS FARGO BANK is not a trustee and only said RICHARD K. WRINKLE and JOYCE M. WRINKLE are the trustees of the trust with regard to those assets until the death of the survivor of said RICHARD K. WRINKLE and JOYCE M. WRINKLE whereupon said assets shall be included in that part of the trust of which WELLS FARGO BANK is a co-trustee. Any vacancy created by said RICHARD K. WRINKLE and JOYCE M. WRINKLE being unable to so serve shall be filled by said MICHAEL R. WRINKLE.

B. For the CREDIT SHELTER TRUST, we name as trustee the Surviving Spouse, said MICHAEL R. WRINKLE, and WELLS FARGO

THIRD AMENDMENT DATED APRIL 6, 2001, TO THE RICHARD K. WRINKLE AND JOYCE M. WRINKLE TRUST AGREEMENT OF 1985, PAGE 18

BANK as co-trustees, provided however, that with regard to any part of the what is now 111,776 shares of United Parcel Service-Class A restricted stock in the trust and any part of the what is now 20,000 shares of Overseas Partnership Ltd. in the trust, said WELLS FARGO BANK is not a trustee and only the surviving spouse and said MICHAEL R. WRINKLE are the trustees of the trust with regard to those assets until the death of the surviving spouse or until, during the life of the surviving spouse, both the surviving spouse and said MICHAEL R. WRINKLE are both unable to serve as trustee, in which event said assets shall be included in that part of the trust of which WELLS FARGO BANK is a trustee. If the Surviving Spouse and said MICHAEL R. WRINKLE are unable to so serve as trustee, the vacancy shall not be filled.

C. For the SURVIVOR'S TRUST, we name as trustee the Surviving Spouse, said MICHAEL R. WRINKLE, and WELLS FARGO BANK as co-trustees, provided however, that with regard to any part of the what is now 111,776 shares of United Parcel Service-Class A restricted stock in the trust and any part of the what is now 20,000 shares of Overseas Partnership Ltd. in the trust, said WELLS FARGO BANK is not a trustee and only the surviving spouse and said MICHAEL R. WRINKLE are the trustees of the trust with regard to those assets until the death of the surviving spouse or until, during the life of the surviving spouse, both the surviving spouse and said MICHAEL R. WRINKLE are both unable to serve as trustee, in which event said assets shall be included in that part of the trust of which WELLS FARGO BANK is a trustee. If the

Surviving Spouse and said MICHAEL R. WRINKLE are unable to so serve as trustee, the vacancy shall not be filled.

D. For the TRUST FOR RICHARD D. WRINKLE, we name as trustee said MICHAEL R. WRINKLE, and WELLS FARGO BANK as co-trustees. If said MICHAEL R. WRINKLE is unable to so serve, the vacancy shall not be filled.

E. For the SPECIAL NEEDS TRUST FOR RICHARD D. WRINKLE, we name as trustee said MICHAEL R. WRINKLE and WELLS FARGO BANK as co-trustees. If said MICHAEL R. WRINKLE is unable to so serve, the vacancy shall not be filled.

F. For the TRUST FOR PERSON UNDER AGE 27, we name as trustee the surviving parent of the beneficiary, and if that person is unable to so serve, we name WELLS FARGO BANK as trustee.

G. Any person named herein as trustee or successor trustee shall serve without bond.

#### VII. Trustee's Powers and Duties

A. To carry out the provisions of any trust created herein, the trustee shall have full power to sell, borrow, encumber, convey, exchange, invest, reinvest, partition, divide, improve, and repair the property constituting the trust estate, and the trustee shall have all powers conferred on the trustee by law and all powers contained in the California Probate Code Sections 16200-16249 and any successor statutes. The enumeration of certain powers in this instrument shall not limit the trustee's general powers, and the trustee shall have all the rights, powers, and privileges that an absolute owner of

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the same property would have subject to the trustee's fiduciary obligations and subject to any limitations stated elsewhere in this instrument.

B. The trustee shall have full power to make gifts on behalf of the trustors to the trustors' children and grandchildren to the full extent of the federal annual gift tax exclusion in effect from time to time, including the \$10,000.00 per donee annual exclusion under Internal Revenue Code Section 2503(b) or any successor statute. This provision does not apply to the trustee of the CREDIT SHELTER TRUST or the trustee of the TRUST FOR PERSON UNDER AGE 27. No gifts shall be made unless necessary or appropriate to reduce anticipated federal estate tax.

#### VIII. General Administrative Provisions

A. The validity of this trust and the construction of its beneficial provisions shall be governed by the laws of the State of California.

B. Where co-trustees are serving, the signature of all trustees is required to conduct any act in behalf of the trust.

C. Any person named herein as trustee shall cease to serve as trustee either upon formal written resignation by that person as trustee, or upon the certificate of a medical doctor that the person serving as trustee is not mentally competent to so serve.

D. Any person acting as trustee shall be entitled to reasonable compensation for services rendered as trustee of any of the trusts established herein. For the trusts of which both



or either of us are/is the beneficiary, the trustee shall be entitled to compensation for services rendered in connection with our support, maintenance, and personal care, including, but not limited to, assisting with our household chores, banking, or taking us to the doctor, or other places where we need to go, assisting us to find appropriate living accommodations should we no longer be able to live in our home, and any act which entails providing for our needs. The trustee is authorized to hire persons to assist us with the above-mentioned items of personal assistance, support, and personal care. Any unpaid services of the trustee are to be considered a debt of both or either of us, as the case may be, payable from the trust estate.

E. If the trustors die in a common disaster, and it is difficult or impossible to ascertain which spouse died first, it shall be presumed that the wife survived the husband for purposes of this trust.

#### IX. Revocation of Trust

A. With regard to the trust created herein of which we are the primary beneficiaries, either one of us may revoke or modify said trust instrument, in writing, at any time while both of us are alive.

B. When the CREDIT SHELTER TRUST is funded, it may not be modified or revoked except that the Surviving Spouse and said MICHAEL R. WRINKLE shall each have the power to name or replace the trustee to serve with or without bond as either one of them shall decide.

C. The SURVIVOR'S TRUST may be modified or revoked by the Surviving Spouse, in writing, at any time.

D. When the TRUST FOR RICHARD D. WRINKLE is funded, it may not be modified or revoked.

E. When the SPECIAL NEEDS TRUST FOR RICHARD D. WRINKLE is funded, it may not be modified or revoked.

F. When the TRUST FOR PERSON UNDER AGE 27 is funded, it may not be modified or revoked.

**X. No Contest Clause**

If any person shall contest the validity of this trust agreement, the trustee shall distribute to said person One Dollar (\$1.00) and no more in lieu of the provisions which we have made or might have made for such person so contesting this trust.

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XI. Execution Clause

We certify that we have read and approve this DECLARATION AND TRUST INSTRUMENT and that it correctly states the terms and conditions under which the trust property is to be held, managed, and disposed of by the trustee(s).

Executed at Hayward, California, on APRIL 6, 2001.

Richard K. Wrinkle  
RICHARD K. WRINKLE, TRUSTOR

Joyce M. Wrinkle  
JOYCE M. WRINKLE, TRUSTOR

Richard K. Wrinkle  
RICHARD K. WRINKLE, TRUSTEE

Joyce M. Wrinkle  
JOYCE M. WRINKLE, TRUSTEE

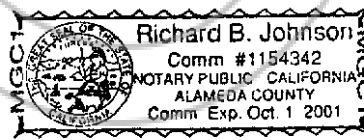
see next  
pg. for  
Notary  
Seal  
for these  
2 names

WELLS FARGO BANK, TRUSTEE  
by Marian Marquez

STATE OF CALIFORNIA )  
                                  ) SS  
COUNTY OF ALAMEDA )

On APRIL 6, 2001, before me, RICHARD B. JOHNSON, Notary Public in and for said County and State, personally appeared RICHARD K. WRINKLE and JOYCE M. WRINKLE, 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.



Richard B. Johnson  
RICHARD B. JOHNSON

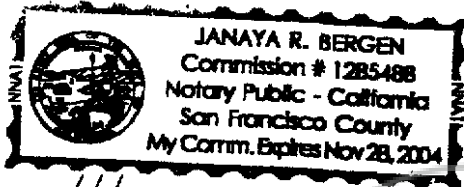
THIRD AMENDMENT DATED APRIL 6, 2001, TO THE RICHARD K. WRINKLE AND JOYCE M. WRINKLE TRUST AGREEMENT OF 1985, PAGE 24

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STATE OF CALIFORNIA )  
                                  San Francisco ) SS  
COUNTY OF ALAMEDA )

On April 10, 2001, before me, Janaya R. Bergen, Notary Public in and for said County and State, personally appeared WELLS FARGO BANK by Catherine S. Nakamura & Maria Marquez 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.



Janaya R. Bergen  
NOTARY PUBLIC

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