

Portion of APN: 1319-30-645-003.

After Recording, Mail to:

Ejalu Smith and Elizabeth Zainasheff
c/o Raymond F. Churchill, PLC
39812 Mission Blvd #207
Fremont, CA 94539

Mail Tax Statements to:

Ejalu Smith and Elizabeth Zainasheff
10217 Sunrise Vista
Auburn, CA 95603



KAREN ELLISON, RECORDER

The undersigned affirms that this document does not contain the social security number of any person. (NRS 239B.030).

CERTIFICATE OF TRUST

(This page is intentionally blank)

CERTIFICATION OF TRUST

NAME OF TRUST: SUZAN ZAINASHEFF REVOCABLE LIVING TRUST.

DATE OF TRUST: The Trust was originally created on February 18, 2008. It was completely restated on July 15, 2017.

TAXPAYER IDENTIFICATION NUMBER: Available upon request.

SETTLOR: SUZAN ZAINASHEFF.

INITIAL TRUSTEE: SUZAN ZAINASHEFF who died on November 30, 2018.

SUCCESSOR TRUSTEES: ELIZABETH ZAINASHEFF and EJALU K. SMITH.

POWERS OF TRUSTEE: SEE EXHIBIT A.

FORM OF TITLE TO TRUST ASSETS: Title to Trust assets should be taken in the following form: "ELIZABETH ZAINASHEFF and EJALU K. SMITH, AS TRUSTEES OF THE SUZAN ZAINASHEFF REVOCABLE LIVING TRUST."

REVOCABILITY OF TRUST: The Trust is irrevocable.

REVOCATION, MODIFICATION, OR AMENDMENTS: The Trust has not been revoked, modified, or amended in any manner that would cause the representations contained herein to be incorrect.

SIGNATURE OF ALL ACTING TRUSTEES: This Certification of Trust has been signed by all currently acting Trustees of the Trust.

RELIANCE ON THIS CERTIFICATION: This Certification of Trust is presented in lieu of a copy of the Trust instrument to establish the existence and/or terms of the Trust and is made in accordance with California Probate Code §18100.5 and California Commercial Code §8402(a)(2)-(5). Any transaction entered into by a person acting in reliance on this Certification of Trust shall be enforceable against the Trust assets. Probate Code §18100.5(h) provides that, except for requests for excerpts of Trust provisions designating the Trustee and the Trustees' powers, any person who refuses to accept this Certification in lieu of the original Trust document will be liable for damages, including attorney fees, incurred as a result of that refusal, if the court determines that the person acted in bad faith in requesting the Trust document.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

DATED: 5/25, 2019
CG

Elizabeth Zainasheff
ELIZABETH ZAINASHEFF

Ejalu K. Smith
EJALU K. SMITH

Elizabeth Zainasheff 7/18/2019
Elizabeth Zainasheff

Ejalu K. Smith 7-18-19
Ejalu K. Smith

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Placer

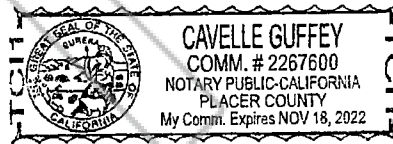
On 7/18/2019 before me, Cavelle Guffey, Notary Public
(insert name and title of the officer)

personally appeared Elizabeth Zainasheff
who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Cavelle Guffey (Seal)



ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Placer

On 7/18/2019 before me, Cavelle Guffey, Notary Public,
(insert name and title of the officer)

personally appeared Ejalu K. Smith
who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Cavelle Guffey (Seal)

