WHEN RECORDED RETURN TO:

PAUL O'REAR 122 CALISTOGA RD. #179 SANTA ROSA, CA 95409



Skagit County Auditor

\$359.00

5/30/2017 Page

1 of

18 11:28AM

Chicago Title Insurance Company

425 Commercial Street, Mount Vernon, Washington 98273 620028986

420 Continue Clar Curset, Mount Vernon, Washington 90210 020020900
DOCUMENT TITLE(s)
MODIFICATION OF DEED OF TRUST, ASSIGNMENT OF RENTS AND LEASES,
FIXTURE FILING AND SECURITY AGREEMENT
REFERENCE NUMBER(s) OF DOCUMENTS ASSIGNED OR RELEASED:
201610070120
GRANTOR(s):
1. NWCC INVESTMENTS IX, LLC
2.
3.
GRANTEE(s): 1. FIDELITY NATIONAL TITLE INSURANCE COMPANY
2. PENSCO TRUST COMPANY LLC
3.
Additional names on page 2 of the document
ABBREVIATED LEGAL DESCRIPTION:
Complete legal description is on pageof the document
ASSESSOR'S PROPERTY TAX PARCEL ACCOUNT NUMBER(s):
(sign only if applicable) I am requesting an emergency nonstandard recording for an additional fee as provided in RW 36.18.010. I understand that the recording processing requirements may gover up or otherwise obscure some part
of the text of the original document
Signature VICOUA D. DV I ATTLE POV TOV

This cover sheet is for the County Recorder's indexing purposes only.

The Recorder will rely on the information provided on the form and will not read the document to verify the accuracy or completeness of the indexing information provided herein.

After Recording Mail To:

Paul O'Rear 122 Calistoga Rd. #179 Santa Rosa, CA 95409

MODIFICATION OF DEED OF TRUST, ASSIGNMENT OF RENTS AND LEASES, FIXTURE FILING AND SECURITY AGREEMENT

GRANTOR:

NWCC INVESTMENTS IX, LLC, a Washington limited liability

company

GRANTEE:

 PENSCO Trust Company LLC Custodian fbo Paul O'Rear IRA Account #OR032 (12.50%);

 Paul O'Rear, Trustee of the Paul O'Rear 2004 Revocable Living Trust (11.25%)

 Equity Trust Company Custodian FBO Jeffrey M. Hawkinson IRA (18.75%);

 Kenneth G. or Cheryl K. Edwards as Trustees of the Edwards Family Trust U/A dated April 2, 1986 (23.125%):

5. Equity Trust Company Custodian FBO Laura R. Siniscalchi IRA (4.25%);

 Equity Trust Company Custodian FBO lan S. Stuart IRA (6.25%);

7. Ian S Stuart, Trustee of The Stuart Family Trust u/a Dated 9-1-2000 (11.375%);

8. Rolf Wessman, a married man as his separate property (12.50%)

LEGAL DESCRIPTION:

Ptn Lot 10, Mount Vernon Acreage, Vol. 3, P 102

ASSESSOR'S PROPERTY TAX

PARCEL ACCOUNT NO:

P53850 / 3746-000-010-0407

RECORDING NO. OF DEED OF TRUST: 201610070120

THIS MODIFICATION OF DEED OF TRUST, ASSIGNMENT OF RENTS AND LEASES, FIXTURE FILMG AND SECURITY AGREEMENT (this "DOT Modification") dated May 18, 2017, modifies the Deed of Trust, Assignment of Rents and Leases, Fixture Filing and Security Agreement ("Deed of Frust" dated September 30, 2016, recorded under Skagit County Auditor's Recording No. №1610070120, from NWCC INVESTMENTS IX, LLC, a Washington limited liability company, as Grantor to FIDELITY NATIONAL TITLE INSURANCE COMPANY, as Trustee, in favor of PENSCO Trust Company LLC Custodian fbo Paul O'Rear IRA Account #OR032, as to an undivided 20 00% interest; Equity Trust Company Custodian FBO Jeffrey M. Hawkinson IRA, as to an undivided 20.00% interest, Kenneth G. or Cheryl K. Edwards as Trustees of the Edwards Family Trust U/A dated April 2, 1986, as to an undivided 20.00% interest; Equity Trust Company Custodian FBO Laura R. Siniscalchi IRA, as to an undivided 6.80% interest; Equity Trust Company Custodian FBO an S. Swart IRA, as to an undivided 8.00% interest; Ian S Stuart, Trustee of The Stuart Family Trust wa Dated 9-1-2000 as to an undivided 5.20% interest; and Rolf Wessman, a married man as his separate property as to an undivided 20.00% interest, as Beneficiary (collectively, "Original Lender"), encumbering the real property ("Property") legally described on Exhibit A to the Deed of Trust. The Deed of Trust is modified as provided below pursuant to a Loan Modification and Additional Advance Agreement ("Modification Agreement") dated the same as this DOT Modification.

- Capitalized terms used but not defined herein are defined in the Deed of Trust of the Modification Agreement
- 2. All references in the Deed of Trust to the "Note" shall be deemed to refer to the Amended and Restated Promissory Note of even date herewith, in the stated principal amount of \$800,000.00, executed by Grantor and NWCC Holdings V, LLC, a Washington limited liability company (collectively, "Borrower"), an affiliate of Grantor, and payable to the order of Lender, including any and all modifications, extensions, renewals and replacements thereof.
- 3. The definition of the term "Lender" and the Beneficiary under the Deed of Trust is hereby amended as follows: PENSCO Trust Company LLC Custodian fbo Paul O'Rear IRA Account #OR032, as to an undivided 12.50% interest; Paul O'Rear, as Trustee of the Paul O'Rear 2004 Revocable Living Trust, as to an undivided 11.25% interest; Equity Trust Company Custodian FBO Jeffrey M. Hawkinson IRA, as to an undivided 18.75% interest; Kenneth G. or Cheryl K. Edwards as Trustees of the Edwards Family Trust U/A dated April 2, 1986, as to an undivided 23.125% interest; Equity Trust Company Custodian FBO Laura R. Siniscalchi IRA, as to an undivided 4.25% interest; Equity Trust Company Custodian FBO Ian S. Stuart IRA, as to an undivided 6.25% interest; Ian S Stuart, Trustee of The Stuart Family Trust u/a Dated 9-1-2000 as to an undivided 11.375% interest; and Rolf Wessman, a married man as his separate property as to an undivided 12.50% interest.
- 4. The definition of the term "Loan Documents" is modified to include the Modification Agreement, the Note, this DOT Modification, and each other document and instrument relating hereto.
- 5. The maximum principal amount of the Loan secured by the Deed of Trust is increased to Eight Hundred Thousand and No/100 Dollars (\$800,000,00).
- The interest rate of the Loan secured by the Loan is increased as provided in the Note.
- The Maturity Date of the Loan secured by the Deed of Trust is extended as provided in the Note.

- 8. Other modifications to the Loan Documents set forth in the Modification Agreement are incorporated herein by this reference.
- 9. Notwithstanding anything to the contrary in any of the Loan Documents, the Deed of Trust does not secure the Hazardous Substance Indemnity, the Guaranty or any other Loan Document that is expressly stated to be unsecured.
- 10. This OOT Modification may be executed in any number of counterparts, each of which shall be deemed an original, and all of which shall be taken to be one and the same instrument for the same effect as if all parties hereto had signed the same signature page.
- 11. In all other respects the provisions of the Deed of Trust are hereby affirmed and ratified. This DOT Modification is not intended and shall not be construed to impair the validity, priority or enforceability of the Deed of Trust or the other Loan Documents.

DATED as of the year and date first above written.

[signature and notary pages below]

Grantor" WWCC INVESTMENTS IX, LLC, a Washington limited liability company Mark McDonald, Member By: Northwest Capital Corp., a Washington corporation, Member By: Mark McDonald, President State Of WASHINGTON Ss. County of	
DOT MODIFICATION (MT. VERNON) 051817 Page 4 of 12	

1	"Lender":
and the same of th	
	PENSCO Trust Company LLC Custodian fbo
	Paul O'Rear RA Account #OR032,
	as to an undivided 12.50% interest
	PENSCO Trust Company
	By: Chris Rains
	Name: Authorized Signatory
	lts:
	STATE OF COLOR 400)
) ss.
	County of Den Ver) ss.
	Sounty of
	I certify that I know or have satisfactory evidence that Chris Rains is the person who
	appeared before me, and said person acknowledged that he/she signed this instrument, on oath
	stated that he she was authorized to execute the instrument and acknowledged it as the
	anthorized Signar of PENSCO Trust Company LLC Custodian FBO Paul O'Rear
	IRA Account #OR032, to be the free and voluntary act of such party for the uses and purposes
	mentioned in the instrument.
	DATED this 25 day of May , 2017.
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	The state of the s
	Notary Public in and for the State of
	EMILY OSBORNE COLOVADO residing at
	NOTARY PUBLIC
	Name (printed) AVA SOOV V
	NOTARY ID 20144035110 MY COMMISSION EXPIRES SEPTEMBER 9, 2018
	MI COMMISSION OF THE PROPERTY

Raul O'Plea	
aul O'Rear, as Trustee of the aul O'Rear 2004 Revocable Livi s to an undivided 1 25% interes	ng Trust, t
Ounty of	
004 Revocable Living Trust	sfactory evidence that Paul O'Rear, Trustee of the Paul O'Reis the person who appeared before me, and said person instrument and acknowledged it to be his free and voluntary ned in the instrument.
ATED this day of	
	Notary Public in and for the State of residing at
	residing at
Allkad	residing at
Silvad	residing at
Allad	Name (printed): My appointment expires:
Silvad	Name (printed); My appointment expires:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT CIVIL CODE § 1189 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 ___ Sonoma before me, Marilyn J. Renna, Notary Public Here Insert Name and Title of the Officer personally appeared Name(s) of Signer(s) 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. Sertify 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. MARILYN J. RENNA COMM. #2181592 TARY PUBLIC - CALIFORNIA Signature SONOMA COUNTY My Comm. Expires Feb. 24, 2021

Title or Type of Document: Notification Toan unintended document.

Number of Pages: Signer(s) Other Than Named Above:

Capacity(ies) Claimed by Signer(s)

Signer's Name: Signer's Name: Corporate Officer — Title(s):

Capacity(ies) Claimed Dispersion of Corporate Officer — Title(s):

Capacity(ies) Claimed

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or

Place Notary Seal Above

Signer's Name:

☐ Corporate Officer — Title(s):
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other:
☐ Signer Is Representing:
☐ Signer's Name:
☐ Corporate Officer — Title(s):
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other:
☐ Signer Is Representing:
☐ Signer Is Representing:

Equity Trust Company, Custodian FBO	
Jeffrey M. Hawkinson IRA, as to an undivided 18.75% interest	
1 May 1 -	
Name: Jessey M Hawkinson	<u> </u>
to Account Owner	-
STATE OF WASHINGTON)	
County of King	SS.
I certify that I know or have satisfactory	evidence that Effrey M. Howkinson is the person who
appeared before me, and said person ac stated that he/she was authorized to	knowledged that he/she signed this instrument, on oath execute the instrument and acknowledged it as the
Account owner of	Equity Trust Company Custodian FBO Jeffrey M.
mentioned in the instrument.	luntary act of such party for the uses and purposes
	2
DATED this 25 day of 1	2017.
<u> </u>	
JEFFREY C STEINERT	Notary Public on and for the State of
NOTARY PUBLIC	residing at
STATE OF WASHINGTON COMMISSION EXPIRES	Name (printed): STEPE CSEVEN
DECEMBER 29, 2020	My appointment expires; <u>1225-20</u>
Commission of the Commission o	
DOT MODIFICATION (MT. VERNON) 051817	Page 7 of 12
Decremental recomplishers sensionly solidity	

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Manuell H Elwards	
Kenneth G. Edwards, as Trustee of the Edwards Family Trust U/A dated April 2, 1986, as to an undivided 23.125% interest	
as to an arrowing 23.123% interest	
STATE OF CALERDRIAN)	
County of Los Angeles) ss.	
Edwards Family Trust U/A dated April 2, 1986,	ince that Kenneth G. Edwards as Trustee of the is the person who appeared before me, and said rument and acknowledged it to be his free and ed in the instrument.
DATED this 10 day of Mon	, 2017.
	> L H Wh
ALAN H. UEHARA Notary Public - California	Notary Public in and for the State of residing at
Los Angeles County Commission # 2154085	Name (printed): ALIN W NEWARA
	My appointment expires: USIST WW

Equity Trust Company,	
Custodian FBO Laura R. Siniscalchi IRA,	
as to an undivided 4.25% interest	1
	ξ
Name: Laura R. Siniscalchi	
Its JAA Owner	-
	-
STATE OF)	
	SS.
County of)	
I certify that I know or have satisfactory	evidence that is the person who
appeared before the and said person ac	knowledged that he/she signed this instrument, on oath
	execute the instrument and acknowledged it as the
	uity Trust Company Custodian FBO Laura R. Siniscalchi
	such party for the uses and purposes mentioned in the
instrument.	
DATED this day of	, 2017.
DATES and day of	2011.
``\	See attached notarial certificate and
	Notary Public in and for the State of
The state of the s	residing at
	Name (printed):
	My appointment expires:
DOT MODIFICATION (MT. VERNON) 051817	Page 9 of 12

CALIFORNIA ALL- PURPOSE CERTIFICATE OF 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 San Diego	}
0=(2=(2=3=1	
On 05/25/3014 perfore me, _	Alex Melgoza, Notary Public (Here insert name and title of the officer)
	Chair of Land
personally appeared <u>Laura</u> K	Siniscalchi.
- All All All All All All All All All Al	actory 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/h	er/their authorized capacity(ies), and that by
	ent the person(s), or the entity upon behalf of
which the person(s) acted, executed the	
The state of the s	
We want	
I certify under PENALTY OF PERJURY	under the laws of the State of California that
the foregoing paragraph is true and cor	rect.
3 4 5 4 5	
	ALEX MELGOZA
WITNESS my hand and official seal.	Commission No. 2040726 Q NOTARY PUBLIC - CALIFORNIA TO
	SAN DIEGO COUNTY
1 March	Commission Expires September 8, 2017 {
Notary Public Signature (No	otary Public Seal)
Trous F abid bigination (176	
	INSTRUCTIONS FOR COMPLETING THIS FORM
ADDITIONAL OPTIONAL INFORMATI	
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long
144.60 10 10 10 1	as the wording does not require the California notary to violate California notary
Mulitication of Dead of Trust resignment	law.
(Title or description of attached document)	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
of rants and leases, tixture tiling and	 Date of notarization must be the date that the signer(s) personally appeared which
(Title or description of attached document continued)	must also be the same date the acknowledgment is completed.
Number of Pages 12 Document Date 5/05/17	 The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
	• Print the name(s) of document signer(s) who personally appear at the time of
CARACITA OF A PART OF THE CHANGE	notarization. • Indicate the correct singular or plural forms by crossing off incorrect forms (i.e.
CAPACITY CLAIMED BY THE SIGNER	he/she/they, is /ere) or circling the correct forms. Failure to correctly indicate this
☐ Individual (s)	information may lead to rejection of document recording.
☐ Corporate Officer	The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression mudges, re-seal ft a
(Title)	sufficient area permits, otherwise complete a different acknowledgment form.
☐ Partner(s)	Signature of the notary public must match the signature on file with the office of
☐ Attorney-in-Fact	the county clerk. Additional information is not required but could help to ensure Mis
Trustee(s)	acknowledgment is not misused or attached to a different document
Trustee(s) Custo Dian	 Indicate title or type of attached document, number of pages and late. Indicate the capacity claimed by the signer. If the claimed capacity is a

· Securely attach this document to the signed document with a staple.

2015 Version www.NotaryClasses.com 800-873-9865

yr:	
OFFICE OF STREET	
1,	Equity Trust Company,
	Custodian FBO lan S. Stuart IRA,
e ti	as to an undivided 6.25% Interest
Nagar.	
	BY:
	Marrie: / zom Estuart
-	MS FRA DWARE
	STATE OF) ss.
	County of) as:
	I certify that I know or have satisfactory evidence that is the person who
	appeared before me, and said person acknowledged that he/she signed this instrument, on oath
	stated that helshe was authorized to execute the instrument and acknowledged it as the
	of Equity Trust Company Custodian FBO Ian S. Stuart IRA, to
	be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.
	DATED this day of, 2017.
	SEEATTAKED
	Notary Public in and for the State of
	Notary Public in and for the State of
	Notary Public in and for the State of residing atName (printed);
	Notary Public in and for the State ofresiding at
	Notary Public in and for the State of residing atName (printed);
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	Notary Public in and for the State of residing atName (printed);
	Notary Public in and for the State of residing at Name (printed): My appointment expires:
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	Name (orinted): My appointment expires:
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	Name (printed): My appointment expires:
	Notary Public in and for the State of residing at Name (printed): My appointment expires:

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.

CERTIFICATE OF ACKNOWLEDGMENT

State of	California
----------	------------

} **SS**

County of San Diego

OnMAY 23, 2017

before me, Flora P. Gault, Notary Public, personally appeared

AN S. STUART

tor P. Hankt

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/ape 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

FLORA P. GAULT

FLORA P. GAULT

COMMISSION# 2111598 UNITED TO THE PROPERTY OF THE PROPERTY OF

DESCRIPTION OF THE ATTACHED DOCUMENT

MODIFICATION OF DEEP OF TWO SERVICES AND CAME

(Title or description of attached document)

THE CONTROL OF THE ATTACHED DOCUMENT

(Title or description of attached document continued)

Number of Pages _____ Document Date _ at / 18/17

TO 16 100 70120 _____ AS Custodian

(Additional information)

Flora P. Gault, Notary Public Phone: 858-349-4192 My Commission Expires: June 11, 2019 Commission # 2111598

	<u> </u>					
ward of d						
	Jan S. Stuart, as	Trustee of	- 			
B	ึ∖The Stuart/Famil	y Trust U/A dated		, 2000,		
/	as to ap una vide	d 11.375% interes	SI.			
	STATE OF		_)			
	County of) ss.			
			- /			
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			and the second	My appointment e	xpires:	<u> </u>
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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.

CERTIFICATE OF ACKNOWLEDGMENT

State of California
} SS
County of San Diego
On MAY 23, 2017 before me, Flora P. Gault, Notary Public, personally appeared
5. STUART
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 Signature
DESCRIPTION OF THE ATTACHED DOCUMENT MODIFICATION OF DEED OF TRUST SECTION OF REATS AND LEASES, (Title or description of attached document)
(Title or description of attached document continued)
Number of Pages Document Date at 1, 8 1,72
Number of Pages Document Date
2016 (00 7012 O AS TRUSTEC (Additional information)
Flora P. Gault, Notary Public
Phone: 858-349-4192

My Commission Expires: June 11, 2019

Commission # 2111598

	Polf Wessma	4.4	Lawrence Jan
oif Wessman, a	married man as his se		TWITHES HI
to an undivided	d 12.50% interest		6 1
TATE OF)	Witness #
ounty of) ss.	
certify that 1 km	now or have satisfact	tory evidence that Roll	f Wessman, a married man as his
parate property	, is the person who a	ppeared before me, and	d said person acknowledged that he and voluntary act for the uses and
rposes mention	ed in the instrument.	iged it to be his nee a	and voluntary act for the uses and
ATED this	_day of	, 2017.	
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		/ Notary Fublic	residing at
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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate document to which this certificate is attached, and not the	e verifies only the identity of the individual who signed the truthfulness, accuracy, or validity of that document.
State of California)	
County of Sonome)	
On May 18,20 before me, Mar	ilyn J. Renna, Notary Public ,
Date O	Here Insert Name and Title of the Officer
personally appeared Kott 1065	shan-
	Name(s) of Signer(s)
subscribed to the within instrument and acknowle	evidence to be the person(s) whose name(s) is/ere diged to me that he/she/they executed the same in s/her/their signature(s) on the instrument the person(s), ed, executed the instrument.
	pertify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph true and correct.
MARILYN J. RENIVA COMM. #2181592 NOTARY PUBLIC - CALIFORNIA SONOMA COUNTY	VITNESS my hand and official seal.
My Comm. Expires Feb. 24, 2021	Signature of Notary Public
Place Notary Sea! Above	Signature of Morary Public
Place Notary Sea! Above OPT Though this section is optional, completing this i	
Place Notary Sea! Above OPT Though this section is optional, completing this i fraudulent reattachment of this Description of Attached Document Title or Type of Document:	Signature of Notary Public TONAL Information can deter alteration of the document or form to an unintended document. Document Date:
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Place Notary Seal Above OPT Though this section is optional, completing this i fraudulent realtachment of this Description of Attached Document Title or Type of Document: Number of Pages: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual	Signature of Notary Public TONAL Information can deter alteration of the document or form to an unintended document. Document Date: Named Above: Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact
Place Notary Seal Above OPT Though this section is optional, completing this i fraudulent realtachment of this Description of Attached Document Title or Type of Document: Number of Pages: Signer(s) Other Than Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited — General Individual — Attorney in Fact Trustee — Guardian or Conservator	Signature of Norary Public TONAL Information can deter alteration of the document or form to an unintended document. Document Date: Named Above: Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator
Place Notary Seal Above OPT Though this section is optional, completing this i fraudulent realtachment of this Description of Attached Document Title or Type of Document: Number of Pages: Signer(s) Other Than Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual	Signature of Norary Public TONAL Information can deter alteration of the document or form to an unintended document. Document Date: Named Above: Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: