

**RECORDING REQUESTED BY
AND WHEN RECORDED MAIL TO:**
WALLS LAW FIRM
8861 WEST SAHARA AVENUE, SUITE 220
LAS VEGAS, NEVADA 89117

MAIL TAX STATEMENTS TO:
THE MAXSON FAMILY TRUST
3013 CAMPBELL CIRCLE
LAS VEGAS, NV 89107

APN: P58508

AFFIDAVIT OF DEATH OF TRUSTEE - CERTIFICATE OF INCUMBENCY

The undersigned, being duly sworn, deposes and says:

1. That on December 19, 2008, Robert C. Maxson and Sylvia P. Maxson executed a revocable living trust named the Maxson Family Trust ("Trust") wherein Robert C. Maxson and Sylvia P. Maxson were Grantors;
2. Pursuant to Article 2, Section 2.1 of the Trust, Robert C. Maxson and Sylvia P. Maxson were appointed as initial Trustees of the Trust;
3. Sylvia P. Maxson died on November 15, 2023. Upon the death of Sylvia P. Maxson, Robert C. Maxson was serving as sole Trustee of the Trust;
4. Robert C. Maxson died on September 24, 2025, a true and correct copy of his death certificate is attached hereto;
5. Article 2, Section 2.3 of the Trust further provided that upon the death of both Robert C. Maxson and Sylvia P. Maxson, Kimberly Maxson Rushton shall serve as successor Trustee;
6. That Kimberly Maxson Rushton hereby agrees to serve as successor Trustee, accepts the duties and responsibilities thereof, and be bound by the terms of the Trust;
7. That the successor Trustee has, among other powers, the power to sell, exchange, lease and otherwise engage in transactions involving Trust assets as the Trustee deem appropriate;
8. In addition to personal property owned by the Trust, the Trust owns certain real property described as follows:

Lots 5, 6, and 7, Block 801, NORTHERN PACIFIC ADDITION TO ANACORTES, according to the plat thereof, recorded in Volume 2 of Plats, Pages 9 through 11 records of Skagit County, Washington; and that portion of the former railway right of way in Section 23, Township 35 North, Range 1 East of the Willamette Meridian more fully described on Exhibit "A" attached hereto and made a part thereof.

Commonly known as: 3312 Oakes Avenue, Anacortes, WA 98221

9. The mailing address for the Trustee is: 3013 Campbell Circle, Las Vegas, NV 89107

Dated November 5, 2025

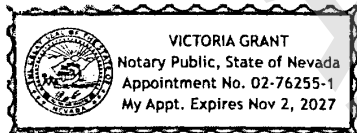
Kimberly Maxson Rushton
Kimberly Maxson Rushton

NOTARY CERTIFICATE FOR
AFFIDAVIT OF DEATH OF TRUSTEE - CERTIFICATE OF INCUMBENCY
APN P58508

STATE OF NEVADA)
)ss:
COUNTY OF CLARK)

Subscribed and sworn to before me on this 5th day of November, 2025, by
Kimberly Maxson Rushton who proved to me on the basis of satisfactory evidence to be the
person who appeared before me.

WITNESS my hand and official seal.



Victoria Grant
NOTARY PUBLIC

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH



CERTIFICATE NUMBER 2025-047594

DATE ISSUED: 09/29/2025
FEE NUMBERFIRST AND MIDDLE NAME(S) ROBERT CLINTON
LAST NAME(S) MAXSONCOUNTY OF DEATH SKAGIT
DATE OF DEATH SEPTEMBER 24, 2025
HOUR OF DEATH 08:00 PM
SEX MALE AGE 89 YEARS
SOCIAL SECURITY NUMBER [REDACTED]HISPANIC ORIGIN NO, NOT SPANISH/HISPANIC/LATINO
RACE WHITEBIRTH DATE [REDACTED]
BIRTHPLACE WATSON, ARKANSASMARITAL STATUS WIDOWED
SURVIVING SPOUSE: NOT APPLICABLEOCCUPATION PROFESSOR/POST-SECONDARY EDUCATION
INDUSTRY EDUCATION - UNIVERSITIES/PROFESSIONAL
EDUCATION DOCTORATE OR PROFESSIONAL DEGREE
US ARMED FORCES NOINFORMANT ROBERT TODD MAXSON
RELATIONSHIP SON
ADDRESS 32 PINE MANOR DR, LITTLE ROCK, AR 72207CAUSE OF DEATH
A ASPIRATION PNEUMONIA
INTERVAL 3 WEEKS
B PROGRESSIVE DYSPHAGIA
INTERVAL 6 MONTHS
C CEREBROVASCULAR ACCIDENT
INTERVAL 8 YEARS
D
INTERVAL

OTHER CONDITIONS CONTRIBUTING TO DEATH

DATE OF INJURY
HOUR OF INJURY
INJURY AT WORK
PLACE OF INJURY

LOCATION OF INJURY

CITY, STATE, ZIP
COUNTY
DESCRIBE HOW INJURY OCCURRED

IF TRANSPORTATION INJURY SPECIFY NOT APPLICABLE

PLACE OF DEATH DECEDENT'S HOME
FACILITY OR ADDRESS 3312 OAKES AVE
CITY, STATE, ZIP ANACORTES, WASHINGTON 98221-1208RESIDENCE STREET 3312 OAKES AVE
CITY, STATE, ZIP ANACORTES, WA 98221-1208
INSIDE CITY LIMITS: YES COUNTY SKAGIT
TRIBAL RESERVATION: NOT APPLICABLE
LENGTH OF TIME AT RESIDENCE 19 YEARSFATHER RUSSELL MAXSON
MOTHER EDNA [REDACTED]METHOD OF DISPOSITION BURIAL
PLACE OF DISPOSITION GRAND VIEW CEMETERYCITY, STATE: ANACORTES, WASHINGTON
DISPOSITION DATE SEPTEMBER 30, 2025

FUNERAL FACILITY: EVANS FUNERAL CHAPEL AND CREMATORY INC.

ADDRESS 1105 32ND STREET
CITY, STATE, ZIP ANACORTES, WASHINGTON 98221
FUNERAL DIRECTOR COLE B. ERIKSONMANNER OF DEATH: NATURAL
AUTOPSY NO
WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE
CAUSE OF DEATH NOT APPLICABLE
DID TOBACCO USE CONTRIBUTE TO DEATH NO
PREGNANCY STATUS IF FEMALE NOT APPLICABLECERTIFIER NAME LESLIE A. ESTEP, MD
TITLE PHYSICIAN
CERTIFIER ADDRESS 227 FREEWAY DRIVE SUITE A
CITY, STATE, ZIP: MOUNT VERNON, WASHINGTON 98273
DATE SIGNED SEPTEMBER 25, 2025CASE REFERRED TO ME/CORONER: NO
FILE NUMBER NOT APPLICABLE
ATTENDING PHYSICIAN NOT APPLICABLELOCAL DEPUTY REGISTRAR CHRISTIAN STECHER
DATE RECEIVED SEPTEMBER 29, 2025

DOH422 132SKAGIT (2/22)

NOT VALID IF PHOTOCOPIED OR ALTERED