

Prepared By:
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CERTIFICATE OF TRUST AGREEMENT

3/14/08 11:38:40
P BK 124 PG 738
DESO TO COUNTY, MS
W.E. DAVIS, CH CLERK

1. NAME OF THE TRUST:

The Kendall Family Trust, dated May 29, 1981, hereinafter, the ("Trust")

2. NAME OF THE TRUSTEE:

Dona S. Kendall, Trustee

3. STREET AND MAILING ADDRESS (OFFICE) OF THE TRUSTEE:

500 East Olive Avenue, Suite 720
Burbank, California 91501

4. STREET AND MAILING ADDRESS (RESIDENCE) OF THE TRUSTEE:

500 East Olive Avenue, Suite 720
Burbank, California 91501

5. LEGAL DESCRIPTION OF INTERESTS IN REAL PROPERTY OWNED BY OR CONVEYED TO THE TRUST:

All interests in real property hereafter conveyed to said Trust. Any instrument conveying such property to the Trust shall be and is hereby deemed an amendment to this Certificate of Trust. Indexing instructions indefinite.

6. ANTICIPATED DATE OF TERMINATION OF THE TRUST:

The Trust will terminate upon the first to occur of the following: (i) revocation of the trust by the settlor, (ii) expiration of the term allowed for the trust under the rule against perpetuities, and (iii) distribution of all of the trust assets in accordance with the terms of the agreement creating the Trust.

7. GENERAL POWERS GRANTED TO THE TRUSTEE:

See Attached Exhibit, incorporated herein by reference.

IN WITNESS WHEREOF, the Trustee has executed this Certificate of Trust as of this 20th day of December, 2007.

Dona S. Kendall
Dona S. Kendall, as Trustee

STATE OF CALIFORNIA
COUNTY OF LOS ANGELES

Personally appeared before me, the undersigned authority in and for the said county and state, on this ____ day of _____, 20__, within my jurisdiction, the within named Dona S. Kendall, who, in the capacity stated herein, acknowledged that they executed the above and foregoing instrument in the capacity therein stated.

NOTARY PUBLIC

My Commission Expires:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

BK 124 PG 740

No. 5907

State of California

County of Los Angeles

On DECEMBER 20, 2007 before me, SHARON A THOMPSON Notary Public

personally appeared DONA S. KENDELL

personally known to me - OR - 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.

Signature of Sharon A. Thompson

OPTIONAL

Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNER

- INDIVIDUAL
CORPORATE OFFICER

TITLE(S)

- PARTNER(S) LIMITED GENERAL
ATTORNEY-IN-FACT
TRUSTEE(S)
GUARDIAN/CONSERVATOR
OTHER:

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

DESCRIPTION OF ATTACHED DOCUMENT

Certificate of Trust Agreement
TITLE OR TYPE OF DOCUMENT

NUMBER OF PAGES

DATE OF DOCUMENT

SIGNER(S) OTHER THAN NAMED ABOVE