CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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State of California	3	
County of SAN BERTARDIA	. 1 2 SS.	
County of SAND DERSIALDIN	00	
	y	
On 100 13, 1999 before me, 78	There of with the	100
/Date // / Des Sie me, //	Name and Title of Officer (e.g., "Jane Doe A stary Public")	4,00
personally appeared TOSEPH B. H	PEPLANES AND MACIA A	OPTI
and the same of th	Name(s) of Signer(s)	/ King
	☐ personally known to me	
	proved to me on the basis of satis	factory
	evidence	
	An he does Co. 1	
	to be the person(s) whose name(s) subscribed to the within instrumen	18 are
	acknowledged to me that he/site/they ex	n dNO ecuted
	the same in his/he/(mair) auth	orized
	capacity(ies)? and that by -his/live	t/their
TAMBRA L MUELLER	signature Soon the instrument the person	(⑤), or
Commission # 1199:07	the entity upon behalf of which the per	sori(s)
Notary Public - California	acted, executed the instrument.	
San Bernardino County (7) My Cornm, Expires Cat 2: 1, 2002	WITNESS my hand and official seal.	
	Mind and official seal.	
Place Notary Seal Above	Santag Anuille	رع
Proce Notary Seal Addye	ື້ Signa ນາງຢາວ Notary Public	
OP	TIONAL	
Though the information below is not required by law, and could prevent fraudulant removal and	it may prove valuable to persons relying on the docul reattachment of this form to another document.	men!
Description of Attached Document Title or Type of Document:	MILDEED	
Document Date: 1000. 63, 19	Number of Pages:	
	1/10	
Signer(s) Other Than Named Above	NH	
Capacity(ies) Claimed by Signer		
Signer's Name:	UIA	**************************************
[] Individual	A 1/16	ER III
Corporate Officer — Title(s):	Top of thur	nio here
☐ Partner — ☐ Limited ☐ General	/	- 1
Attorney in Fact		
Trustee	11.	
☐ Guardian or Conservator ☐ Other:	114	
1	///	
	' // F	
Signer Is Representing:	/ //	1

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Prod. No. 5907

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