My commission expires _

, tee attached

CALIFORNIA ALL-PURPOSE 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 Los Angeles)	
·	rein M. Muson III Dildir
On July 17, 2010 before me, 1769	Here Insert Name and Title of the Officer
Date Of all Educated Tops	
personally appeared Robert Edward Trop	
	Name(s) of Signer(s)
who proved to me on the basis of satisfactory of subscribed to the within instrument and acknowle his/hpr/thefr authorized capacity(ies), and that by his er the entity upon behalf of which the person(e) act	evidence to be the person(s) whose name(s) is are adged to me that he she/they executed the same in he instrument the person(s), ed, executed the instrument.
	certify under PENALTY OF PERJURY under the laws f the State of California that the foregoing paragraph strue and correct.
DEVREN III. NUMEZ COMM. #2046833	signature Signature of Notary Public
Place Notary Seal Above	
OPT	IONAL
	nformation can deter alteration of the document or form to an unintended document.
Description of Attached Document Title or Type of Document:	Document Date:
Capacity(ies) Claimed by Signer(s)	
Signer's Name:	Signer's Name:
☐ Corporate Officer — Title(s):	☐ Corporate Officer — Title(s):
☐ Partner ─ ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact	 □ Partner — □ Limited □ General □ Individual □ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator	☐ Trustee ☐ Guardian or Conservator
Other:	☐ Other:
Signer Is Representing:	Signer Is Representing:

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