

When Recorded, Return to:
Carl David Smith II
136 Shadow point Dr.
St. George, UT 84770
MNT No.: ET10054
Parcel Number: 14:055:0010
14-055-0048 and 14-05-0013

**AFFIDAVIT OF IDENTITY
DEATH OF TRUSTEE**

STATE of Utah)
) ss.
COUNTY of Washington)

Carl David Smith II, being first duly sworn, deposes and says:

1. He is the son of Carl D. Smith, deceased.
2. At the time of his death, Carl D. Smith held title to certain real property and improvements located in Utah County, State of UT in his capacity as the Trustee of the Carl D. Smith Family Revocable Trust dated January 30, 1990 . The real property and improvements are described as follows:

See Attached Exhibit "A"

3. Carl D. Smith died in Pleasant Grove, Utah, on June 1, 1994 and a certified copy of his Death Certificate is attached hereto and by this reference is made a part hereof.
4. Affiant knows of his own personal knowledge that the Carl D. Smith that held title to the property described in Exhibit "A" as the Trustee of the Carl D. Smith Family Revocable Trust dated January 30, 1990 is one and the same person as the Carl David Smith named in said Death Certificate.
5. Affiant has now been named as the Successor Trustee under the terms of the Carl D. Smith Family Revocable Trust dated January 30, 1990 in and to the property described in Exhibit "B" and Affiant has agreed to act as and accept the obligations of the position of Successor Trustee of the Carl D. Smith Family Revocable Trust dated January 30, 1990
6. Kathleen M. Smith Cardwell has now been named as the Successor Trustee under the terms of the Carl D. Smith Family Revocable Trust dated January 30, 1990 in and to all other assets of the Trust, including the property identified as Exhibit "C" and Affiant has agreed to act as and accept the obligations of the position of Successor Trustee of the Carl D. Smith Family Revocable Trust dated January 30, 1990
7. Carl David Smith II and Kathleen M. Smith Cardwell now have all authority to act as Successor Trustees of the Carl D. Smith Family Revocable Trust dated January 30, 1990.

8. Affiant further states that Carl D. Smith, as Trustee of the Carl D. Smith Family Revocable Trust dated January 30, 1990, was Deceased at the time of that certain Warranty Deed recorded December 31, 2003, as Entry No. 202549;2003, in the Utah County Recorder's Office and that certain Warranty Deed recorded December 31, 2003, as Entry No. 202550;2003, in the Utah County Recorder's Office, and Affiant further states that James G.E. Smith was the sole Trustee at such time as said deeds were executed and recorded, said deeds affecting the property described in Exhibit "A" herein.

EXECUTED on the 20 day of December, 2021.

Carl David Smith II
Carl David Smith II

STATE of Utah, County of Washington) ss

On the 20 day of December, 2021, personally appeared before me Carl David Smith II, the signer of the foregoing instrument who duly acknowledged to me that he executed the same.

Whitney May Chipman
Notary Public

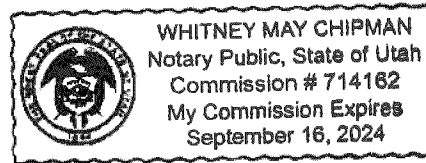


Exhibit A

COM E 1604.25 FT & S 324.7 FT FR NW COR. SEC. 30, T5S, R2E, SLB&M.; S 238.342 FT; S 88 DEG 10' 0" E 23.765 FT; S 85 DEG 21' 0" E 199.55 FT; S 1 DEG 17' 0" E 300.502 FT; N 88 DEG 0' 0" E 392.593 FT; N 2 DEG 0' 0" W 325 FT; N 12 DEG 30' 0" W 239.6 FT; W 576.4 FT M OR L TO BEG
Tax ID 14-055-010

COM S 603.02 FT & W 1033.45 FT FR N 1/4 COR. SEC. 30, T5S, R2E, SLB&M.; N 88 DEG 10' 0" W 91.8 FT; S 0 DEG 19' 0" E 302.43 FT; N 89 DEG 16' 0" E 90.4 FT; N 0 DEG 4' 0" W 298.33 FT TO BEG
Tax ID 14-055-0013

COM S 325.3 FT & W 1126.73 FT FR N 1/4 COR. SEC. 30, T5S, R2E, SLB&M.; S 89 DEG 53' 41" E 69.49 FT; S 256.1 FT; N 88 DEG 9' 59" W 68.05 FT; N 0 DEG 19' 57" W 254.06 FT TO BEG.
Tax ID 14-055-0048

Exhibit "B"

Commencing at a point East 1604.25 feet & South 324.7 feet from the Northwest Corner of Section 30, Township 5 South, Range 2 East, Salt Lake Base and Meridian; and running thence South 238.342 feet; thence South 88°10'00" East 23.765 feet; thence South 85°21'00" East 199.55 feet; thence South 01°17'00" East 300.502; thence North 88°00'00" East 392.593; thence North 02°00'00" West 325 feet; thence North 12°30'00" West 239.6 feet; thence West 576.4 feet more or less to the point of beginning.

Tax ID 14-055-0010

Exhibit "C"

COM S 603.02 FT & W 1033.45 FT FR N 1/4 COR. SEC. 30, T5S, R2E, SLB&M.; N 88 DEG 10' 0" W 91.8 FT; S 0 DEG 19' 0" E 302.43 FT; N 89 DEG 16' 0" E 90.4 FT; N 0 DEG 4' 0" W 298.33 FT TO BEG
Tax ID 14-055-0013

COM S 325.3 FT & W 1126.73 FT FR N 1/4 COR. SEC. 30, T5S, R2E, SLB&M.; S 89 DEG 53' 41" E 69.49 FT; S 256.1 FT; N 88 DEG 9' 59" W 68.05 FT; N 0 DEG 19' 57" W 254.06 FT TO BEG.
Tax ID 14-055-0048

STATE OF UTAH CERTIFICATION OF VITAL RECORD

ENT213090:2021 PG 6 of 6

JUN 14 7440
 STATE OF UTAH - DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH 143 94 004755
 LOCAL FILE NUMBER: 25-0596 STATE FILE NUMBER:

45	NAME OF DECEDENT: FIRST CARL	MIDDLE DAVID	LAST SMITH	SEX MALE	DATE OF BIRTH (Mo, Day, Year) June 1, 1994	TIME OF DEATH (Mo, Day, Year) 0345
5	DATE OF BIRTH (Mo, Day, Year) June 24, 1906	AGE (Years, Months, Days) 87	EDUCATION (Years) High School	UNDER 24 HOURS (Hours, Minutes) None	BIRTH PLACE (City, State) American Fork, Utah	CONFIDENTIAL <input checked="" type="checkbox"/>
4525005	RESIDENCE - STREET AND NUMBER Pleasant Grove		CITY, TOWN OR LOCATION OF DEATH Utah		NAME OF HOSPITAL, NURSING HOME OR OTHER PLACE OF DEATH (If applicable, give street address of location) Alpine Valley Care Center	
1	MARRIAGE STATUS <input checked="" type="checkbox"/> Never Married <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do NOT use retired) Cattleman - Ranching			
2	RESIDENCE - STREET AND NUMBER 155 East 500		CITY, TOWN OR COUNTY Pleasant Grove		COUNTY Utah	
08	INSIDE CITY LIMITS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		ZIP CODE 84062		RACE (Specify) White	
FATHER'S NAME (First, Middle, Last) William T. Smith		MOTHER'S NAME (First, Middle, Last) Margaret Ella Crompton				
INFORMANT NAME, RELATIONSHIP AND MAILING ADDRESS OF INFORMANT James G. E. Smith, son, 108 East Center, Pleasant Grove, Utah 84062						
4	DISPOSITION (Check one) <input type="checkbox"/> Entombed <input type="checkbox"/> Buried <input type="checkbox"/> Other		DATE OF INTERMENT June 4, 1994		PLACE OF DISPOSITION (Name of cemetery, funeral home, or other place) Pleasant Grove City Cemetery	
45	DATE OF DEATH AS STATED BY PHYSICIAN 5/27/94		DATE OF DEATH AS STATED BY REGISTRAR 6/3 JUN 08 1994		MANNER OF DEATH (Check one) <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accidental <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Undetermined <input type="checkbox"/> Pending Investigation	
1	CERTIFIER NAME AND ADDRESS OF PHYSICIAN WHO CERTIFIED THE CAUSE OF DEATH Scott Smith, M.D., 350 East 300 North, American Fork, Utah 84003					
2	REGISTRAR NAME AND ADDRESS OF REGISTRAR Joseph K. Manning, M.D., 940 ...					
200	CAUSE OF DEATH PART 1 - IMMEDIATE CAUSE (Final disease or condition resulting in death) Cardiopulmonary Arrest					
5	PART 2 - OTHER SIGNIFICANT CAUSES (List only one cause on each line) Malnutrition Hypothyroidism Decubitus Ulcer with Sepsis					
MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accidental <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Undetermined <input type="checkbox"/> Pending Investigation						
DATE OF INJURY (Month, Day, Year) None						
LOCATION (Street or rural route number, city or town, county, and state) None						
TIME OF INJURY (If Near Clock) None						
PLACE OF INJURY (At home, farm, store, factory, office, building, etc. Specify) None						
NATURE OF INJURY (Shock, D.B.E., Laceration, etc. (Item 31)) None						

**DATE ISSUED
NOVEMBER 18, 2021**

This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics. Security features of this official document include: High Resolution Border, V & R images in top cycloids, and microtext. This document displays the date, seal, and signature of the Utah State Registrar of Vital Records and Statistics.



Linda S. Winger
Linda S. Winger LCSW
 State Registrar
 Rev. 4/19


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UTAH DEPARTMENT OF HEALTH
 Office of Vital Records & Statistics
 Salt Lake City, Utah



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE