

Certification Of Trust

The Certification of Trust is entered into this _____ day of _____, _____ by and between _____, Trustee(s) of The _____.

1. Name of Trust:

2. Date of Trust:

3. Trust Amendment Dated:

4. Name of Settlor (and address if living):

5. Name of Trustee(s)(s) and Successors (and addresses):

6. Legal Description (attached if necessary):

Land situated in the _____ of _____, County of _____

Commonly known as:

Tax Item No.:

7. The Trustee(s) and/or Successor Trustee(s) possesses and may exercise such powers and authority with respect to the trust assets, both real and personal, as to it, in its sole, absolute and uncontrolled discretion shall deem necessary, proper or convenient to carry out or put into effect any of the provisions of this Trust Agreement, including but not by way of limitation, the following powers and authority:

- a) To dispose of such property and/or any property at any time comprising a part of the trust estate by sale (public or private), exchange, mortgage, pledge, lease for any length of time and with or without covenants of renewal, license, loan or otherwise, as and when and at such price and for such consideration and on such terms as it shall deem advisable.
- b) To make, execute and deliver any and all deeds, contracts, bills of sale, leases, notes or other instruments and/or documents which, in the judgment of the Trustee(s), shall be necessary to carry out or put into effect any of the powers or authority given and granted to the Trustee(s) in the Trust Agreement, even through the same shall extend and bind all or any part of the Trust estate beyond the term of its Trustee(s)ship. (Verbatim provisions attached if applicable)

8. The law governing the interpretation of the provisions of the Trust are those of State of MI.

9. Seller/Trustee(s) and/or Successor Trustee(s) as noted hereinafter, hereby certifies that all provisions of the Trust Agreement remain in full force and effect and that there have been no amendments to said Trust Agreement which in any way or reduces the powers of the Trustee(s) as set forth above.

Dated this ____ day of _____, _____.

Trustee(s) (or Successor):

, Trustee(s)
of The _____

, Trustee(s)
of The _____

STATE OF MICHIGAN)
COUNTY OF _____)

On this ____ day of _____, _____, before me personally appeared _____ to me known to be the person(s) described in and who executed the foregoing instrument and acknowledged that he/she executed the same as himself/herself free act and deed.

Notary Public

County
My commission expires: _____

Drafted by:

When recorded return to: