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UNAFFIRMED
RECORDER

2024-030165

STATE OF INDIANA
LAKE COUNTY
RECORDED AS PRESENTED

10:56 AM 2024 Oct 17

CERTIFICATE OF LIVING TRUST

The Trustee, herein referred to, appeared before witnesses and a Notary Public within the aforementioned county and state, and upon being duly sworn, solemnly affirms the following statement: The undersigned Trustee hereby certify the following:

This Certificate of Living Trust refers to (KAS) LIVING TRUST, and any amendments thereto, executed by Kristi-Enginee Scott TM as Trustee. Any property owned by the Trust may be taken in the name of (KAS) LIVING TRUST The trust has been in existence uninterrupted since (Trust Date).

The Trustee of this Trust is: KRISTI-ENGINEE: SCOTT TM TRUSTEE

ADDRESS OF TRUST:
c/o 2158 45TH STREET
Suite 501
HIGHALND, IN 46322

Trustee serving is Kristi-Enginee Scott TM

The taxpayer identification number for the trust is: TRUST EIN: 99-6750057

The Trustee, as designated in this Trust Agreement, is duly empowered to engage in the acquisition, disposition, leasing, borrowing, administration, and overall management of assets encompassing real estate, intangible assets, intellectual property, and personal property, all conducted under the auspices of the Trust. Furthermore, the Trustee possesses the authority to mortgage real estate holdings, establish and maintain financial accounts, including deposit accounts, lines of credit, and transactional accounts, with both private and public entities, endorse negotiable instruments, effectuate deposits and withdrawals, execute loan agreements, pledge various assets, both tangible and intangible, and conduct all necessary transactions with private or public entities pursuant to any agreements duly executed by the Trustee. Additionally, beyond these overarching powers, the Trustee is vested with the authority to place liens on personal property, real estate, intangible assets, and intellectual property, with the ability to enforce such liens when deemed necessary. The complete scope of the Trustee's powers is comprehensively outlined in the attached power of attorney document.

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NOT AN OFFICIAL DOCUMENT

The Trust is revocable and currently in force. For the transfer, titling, and business transactions on behalf of the Trust, the full legal designation is (KAS) LIVING TRUST, with (Kristi-Angiee Scott) TM serving as Trustee of the (KAS) LIVING TRUST.

A duplicate of this Certificate of Trust holds equal validity to the original. The undersigned hereby certifies, swears, subscribes, and affirms the accuracy and truthfulness of the statements contained within this Certificate of Trust.

1 Timothy 5:8: "But if anyone does not provide for his relatives, and especially for members of his household, he has denied the faith and is worse than an unbeliever."

TRUSTEE:

Kristi Angiee Scott

First Middle Last TM

Beneficiary:

Scott, Kristi Angiee

Last First Middle

Carmelita J. Cook-Neal

Signature of first witness

[Signature]

Signature of second witness

Carmelita J. Cook-Neal

Printed name of first witness

Taywan Tomlin

Printed name of second witness

Testament Under God

The use of a notary below is for identification only and not for entrance into any foreign jurisdiction.

STATE OF INDIANA)

) ss.

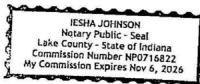
COUNTY OF LAKE)

Subscribed and sworn (or affirmed) before me on this day 17th of October, 2024 by Kristi Angiee Scott proved to me based on satisfactory evidence to be the natural living being who appeared before me and whose name is signed on this instrument.

Notary Name: Iesha Johnson Signature: [Signature]

My commission expires: Nov 6, 2026

(Seal)



NOT AN OFFICIAL DOCUMENT



OFFICE OF THE LAKE COUNTY RECORDER

LAKE COUNTY GOVERNMENT CENTER
2293 NORTH MAIN STREET
CROWN POINT, INDIANA 46307



GINA PIMENTEL
Recorder

PHONE (219) 755-3730
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11. OTHER: _____ PROVINCE INDIANA _____

CUSTOMER INITIALS: JS

DATE: 10/17/24

EMPLOYEE INITIALS: JK

DATE: 10/17/2024