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 ______) _____ before me, _____ Date Here Insert Name and Title of the Officer Personally appeared Name(s) of Signer(s) who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Signature _____ Signature of Notary Public Place Notary Seal Above Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. **Description of Attached Document** Title or Type of Document ______ Document Date _____ Number of Pages _____ Signer(s) Other Than Named Above _____ Capacity(ies) Claimed by Signer(s) __ Signer's Name Signer's Name Corporate Officer—Title(s) _____ Corporate Officer—Title(s) _____ Partner Limited General Partner Limited General Individual Attorney in Fact Individual Attorney in Fact Guardian or Conservator Trustee Guardian or Conservator Trustee Other _____ Other _____ Signer Is Representing _____ Signer Is Representing _____