When Recorded, Return To:

Gregory A. Steed, Esq. Hale | Wood, PLLC 4766 South Holladay Blvd. Holladay, Utah 84117 gasteed@halewoodlaw.com

Mail Tax Notice To:

Karrol Ann McIntyre, Trustee The Leola M. Hagman Restated Trust P.O. Box 540561 North Salt Lake, Utah 84054 13574547
02/22/2021 03:16 PM \$40.00
Book - 11123 P9 - 330-333
RASHELLE HOBBS
RECORDER, SALT LAKE COUNTY, UTAH
HALE & WOOD
4766 HOLLADAY BLUD
SLC UT 84117
BY: CBP, DEPUTY - MA 4 P.

Parcel No. 16-23-132-014-0000

AFFIDAVIT OF SUCCESSOR TRUSTEE

(The Leola M. Hagman Restated Trust)

STATE OF	AZ		
		: SS	
COUNTY OF _	Yuna		

KARROL ANN MCINTYRE ("Affiant"), being first duly sworn, states and represents as follows:

- 1. Under the provisions of *The Leola M. Hagman Restated Trust* dated July 20, 1987 and restated on July 5, 1990 (the "*Trust*"), Affiant is the named successor trustee of the Trust following the death of the Trust's Grantor and initial trustee Leola M. Hagman.
- 2. Leola M. Hagman died on May 7, 2020 (the "Decedent"). A certified copy of the Decedent's death certificate is attached and incorporated hereto as Exhibit "A.".
- 3. The Trust is the Grantee under that certain Quit-Claim Deed dated July 7, 1990, as Document Entry No. 4939554, Book 6235, Pages 2447 2448 in the office of the Salt Lake County Recorder, State of Utah as to real property situate in Salt Lake County, Utah (hereinafter the "Trust Property"), which is more particularly described as follows:

ALL OF LOT 618, ARCADIA HEIGHTS PLAT "F", ACCORDING TO THE OFFICIAL PLAT THEREOF, RECORDED IN THE OFFICE OF THE COUNTY RECORDER OF SAID COUNTY.

4. The purpose of this Affidavit is to record the death of Leola M. Hagman, thereby removing her as trustees of record, and to acknowledge the succession of Karrol Ann McIntyre, as successor trustees of the Trust for the purpose of all future filings and recordings of record pertaining to the Trust Property.

IN WITNESS WHEREOF, the undersigned has executed this Affidavit of Successor Trustees as of the day of February, 2021.
AFFIANT:
Karrol Ann McIntyre
STATE OF
COUNTY OF Na)
On the \(\lambda\right)\) day of February, 2021, KARROL ANN MCINTYRE, the signer of the foregoing Affidavit of Successor Trustee, personally appeared before me, a notary public in and for said State, acknowledged to me that she executed the same and that the statements contained therein are true to the best of her knowledge and belief.
NOTARY PUBLIC
THE STANTING THE S

EXHIBIT "A" Certified Copy of Death Certificate

4823-3567-2283, v. 1

BK 11123 PG 332



				<u> </u>	BK 1112	3 PG 333
		STATE	OF ARIZONA		<i>DN 1112</i>	
ORIGINAL STATE COPY	EPARTMENT	OF HEALTH SER	VICES-BUREA		CORDS	State File Number
1. DECEDENT'S LEGAL NAME (FIRST, MID	DIE LACT CULTUR	CERTIFIC	ATE OF DEATH			102-2020-023990
1. DECEDENT'S LEGAL NAME (PIRST, MID	ULE, LAST, SUFFIX)		2. AKA'S (IF AN	VY)	fo." .	3. DATE OF DEATH
LEOLA, M., HAGMAN		7 20 20 10 10 10 10 10 10 10 10 10 10 10 10 10	A STATE OF THE STA		,	05/07/2020
4. SEX	5, SOCIAL SECURITY I	NUMBER	6. DATE OF BIRTH	Annual Control	7. AGE	
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8, CITY/TOWN, COUNTY AND ZIP OR LOCA	ATION OF DEATH			AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	<u> </u>	·
YUMA, YUMA, 85367	\$.				•-	
9. PLACE OF DEATH (TYPE OF PLACE OF	DEATH AND FACILITY N	AME/ADDRESS)	1 2 2 2 2 2 2 2 2 2			
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10. BIRTHPLACE (CITY AND STATE OR FO	REIGN COUNTRY)	11. MARITAL STATU	S 12	2. NAME OF SURVIVING SP	OUSE PRIOR TO	FIRST MARRIAGE (FIRST, MIDDLE.
LAW BUB MACHINISTON				AST, SUFFIX)		
WILBUR, WASHINGTON 13. DECEDENT'S USUAL RESIDENCE ADD	RESS (STREET CITY CO	WIDOWED	NC	OT LISTED	. 	· · · · · · · · · · · · · · · · · · ·
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14. DECEDENT'S HISPANIC ORIGIN(S):	ALT LAKE CITY,	SALT LAKE, UT, 84	109 🗯 📑			
14. DECEDENT & RISPANIC ORIGIN(S):	,	15. DECEDENT'S RACE(S)	Minds 1.5 min 2.50 min 1.50 mi	2 Prof. 10	16. EVER IN AF	RMED FORCES
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[·		of the second se	· -		17. OCCUPATION	*
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io	-, LAST, GOTTIA)		MOTHERS NAW	ME PRIOR TO FIRST MA	ARRIAGE (FIRS	ST, MIDDLE, LAST, SUFFIX)
EDWARD, , GOODLAKE			HAZEL SALTE	ER# #		<u> </u>
20. INFORMANT'S NAME (FIRST, MIDDLE, I	LAST, SUFFIX)		To determine the common of the	Market and the second of the s	21.	RELATIONSHIP
KARROL, HAGMAN, MCINTY	YRE	dead	5.1.		DA	UGHTER
22. INFORMANT'S MAILING ADDRESS		A manufact of manufact of the control of the contro		Me yn ere		
12585 S FRONTAGE ROAD,	YUMA, AZ, 853	67===	### ### #### #########################	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
23. NAME AND ADDRESS OF FUNERAL FA				OR'S NAME OR RESPONSE	BLE PERSON	25. LICENSE NUMBER
SUNSET VISTA FUNERAL H 11357 E 40TH STREET, YUN		RY & CREMATORY	FRANK, ACUN	JA TERMINA		FUN-000652
26. METHOD(S) OF DISPOSITION	27. NAME AND LOCA	TION OF 1ST DISPOSITION FA	CILITY 28	NAME AND LOCATION OF	2ND DISPOSITIO	
CREMATION	SOMERTON,	EY MORTUARY AND	CREMATORY	AND THE PROPERTY OF THE PROPER		
CREMATION		AL CERTIFICATION S	ECTION CAUSE OF	DEATH PART I		
29. A. IMMEDIATE CAUSE OF DEATH					:	30. APPROXIMATE INTERVAL
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31. B. DUE TO OR AS A CONSEQUENCE OF	F:	The state of the s				UNKNOWN 32. APPROXIMATE INTERVAL
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33. D. DOE TO OR AS A CONSEQUENCE O	r.		urt er			36. APPROXIMATE INTERVAL
						<u> </u>
17 OTHER SIGNIFICANT CONDITIONS CO.	ATOIDI ITING TO THE SE		DEATH PART II		nvo" I	
37. OTHER SIGNIFICANT CONDITIONS CON UNDERLYING CAUSE GIVEN IN PART I;	TIME OF	ATH BUT NOT RESULTING IN	NO NO	39. INJURY AT WO	40. MAN	INER OF DEATH
			NO			RAL DEATH
			41. TIME OF DEA	42. WAS AN AUTOI PERFORMED?		RE AUTOPSY FINDINGS AVAILABLE APLETE THE CAUSE OF DEATH?
ESSENTIAL HYPERTENSION		10	10:11-AM	NO	1.2.30	
		CAUSE AND MA	NNER CERTIFICAT	1 18 C. T. T. 181		3.54 Mg - 1.11 - 1.11

2320 S 22ND DRIVE, YUMA, AZ, 85364

TO THE BEST OF MY KNOWLEDGE, THE INFORMATION ABOVE IS CORRECT AND THE DEATH OCCURRED DUE TO THE CAUSE(S) AND MANNER STATED.

Date Registered: 05/12/2020

J27880U3

Date Issued: 05/18/2020

75

44. NAME OF PERSON COMPLETING CAUSE OF DEATH

BROOKSHER

VS-49.Rev. 12/2017

45. DATE CERTIFIED

05/11/2020



This is a true certification of the facts on file with the Arizona Department of Health Services, Bureau of Vital Records, PHOENIX, ARIZONA Revised 07/2016

RONALD, D.

KRYSTAL COLBURN ASSISTANT STATE REGISTRAR



This copy not valid unless prepared on a form displaying the State Seal and impressed with the raised seal of the issuing agency