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Prepared by:

AFTER RECORDING RETURN TO:  
LINDA M. CARLSON  
5319 W ELSMERE LN  
HERRIMAN, UT 84096

13943254 B: 11334 P: 3547 Total Pages: 2  
04/29/2022 03:24 PM By: asteffensen Fees: \$40.00  
Rashelle Hobbs, Recorder Salt Lake County, Utah  
Return To: FIRST AMERICAN TITLE  
215 S STATE ST. SUITE 280 SALT LAKE CITY, UT 84111



SPACE ABOVE THIS LINE (3 1/2" X 5") FOR RECORDER'S USE

## AFFIDAVIT OF SUCCESSOR TRUSTEE

Escrow No. **91070347LA (BM)**  
A.P.N.: **26-36-329-007-0000**

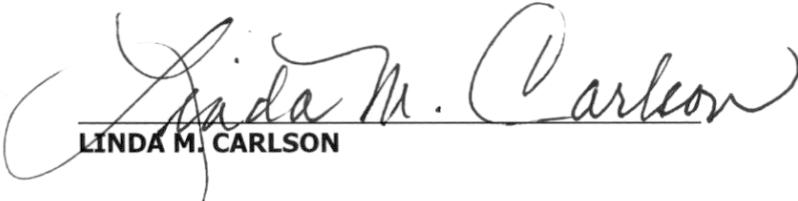
This Affidavit is given to evidence the death of JACOB C. CARLSON, Trustee of the THE JAKE AND LINDA CARLSON FAMILY TRUST, dated AUGUST 21, 2021, and to establish LINDA M. CARLSON, Successor Trustee of said Trust.

The undersigned hereby certifies that the JACOB C. CARLSON listed as Trustee of THE JAKE AND LINDA CARLSON FAMILY TRUST in that certain Warranty Deed recorded September 26, 2012 as Entry No. 11479306 in Book 10060, at Page 985, records of the Recorder of SALT LAKE County, Utah is one and the same person as JACOB CARL CARLSON, listed decedent on the attached certified Certificate of Death.

And by virtue of that death certificate attached hereto and recorded as part hereof and said Declaration of Trust, I do hereby declare that the conditions for Successor Trustee appointment have been met and pursuant to said Declaration of Trust, that I the undersigned, am now authorized as Successor Trustee of said Trust to sell, convey and borrow against any assets of the Trust particularly the property located at 5319 W ELSMERE LN, HERRIMAN, UT 84096, and more particularly described as follows:

ALL OF LOTS E55, HERRIMAN TOWNE CENTER PLAT E - PHASE 1, ACCORDING TO THE OFFICIAL PLAT THEREOF, FILED IN THE OFFICE OF THE SALT LAKE COUNTY RECORDER IN PLAT BOOK 2010P AT PAGE 152.

DATED: April 28, 2022

  
LINDA M. CARLSON

## ALL-PURPOSE NOTARY CERTIFICATE

On 4/28/2022, before me, the undersigned Notary Public, personally  
appeared Linda Carlson,

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person (s) whose name (s)

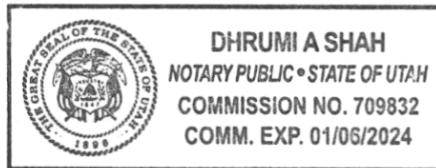
is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their

authorized capacity(ies) and that by his/her/their signature(s) on the instrument is/are the person(s) or the entity upon behalf

of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature D. A - Shah  
Notary Public



My Commission Expires: 1/6/2024

This area for official notarial seal.

**THIS NOTARY CERTIFICATE IS TO BE ATTACHED TO: (TYPE OF DOCUMENT)**

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DATE OF DOCUMENT

BY AND BETWEEN

AND

CONSISTING OF PAGES AND WAS EXECUTED IN CONJUNCTION WITH

FILE NO. 91070347LA (BM)

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