4

DOC # 20250013364
Affidavit & Death Certificate Page 1 of 4
Gary Christensen Washington County Recorder
04/21/2025 11:23:38 AM Fee $ 40.00
By SLEMBOSKI & TOBLER

WHEN RECORDED RETURN TO:
Slemboski & Tobler
32 East 100 South, Suite 203
St. George, Utah 84770
MAIL TAX NOTICE TO:
Daniel J. Tobler, Trustee
32 East 100 South, Suite 203
St. George, Utah 84770

TAX ID: V-DGE-2-33-A

AFFIDAVIT OF DEATH OF TRUSTEE

STATE OF UTAH)
:ss
COUNTY OF WASHINGTON)

JEFFREY DAGEENAKIS, of legal age, being duly sworn, deposes and says:

1. NICOLE PINO, the decedent mentioned in the attached Certificate of Death, is the same person named as Trustee of the Jeffrey John Dageenakis and Nicole Pino Revocable Trust dated September 18, 2019, executed by Jeffrey Dageenakis and Nicole Pino as Trustor.

2. At the time of the decedent's death, decedent was the owner, as Trustee, of certain real property acquired by a deed recorded October 23, 2019, as entry No. 20190043917, in the Official Records of the Recorder of Washington County, State of Utah, covering the following described property situated in Washington County, State of Utah:

A PORTION OF LOT 33, DESERT GARDEN ESTATES PHASE 2, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE AND OF RECORD IN THE WASHINGTON COUNTY RECORDER'S OFFICE.

COMMENCING AT THE SOUTHWEST CORNER OF SECTION 21, TOWNSHIP 41 SOUTH, RANGE 12 WEST, SALT LAKE BASE AND MERIDIAN AND RUNNING THENCE NORTH 89°46'21" EAST ALONG THE SECTION LINE, 1682.56 FEET; THENCE NORTH 0°00'00" EAST, 1042.79 FEET; THENCE NORTH 89°46'59" EAST, 264.19 FEET; THENCE SOUTH 0°13'01" EAST, 11.18 FEET TO A

POINT ON THE SOUTH LINE OF SAID LOT 33, DESERT GARDEN ESTATES PHASE 2, SAID POINT BEING THE TRUE POINT OF BEGINNING; THENCE NORTH 84°31'42" EAST, 235.34 FEET TO A POINT ON THE NORTHEASTERLY LOT LINE OF SAID LOT 33; THENCE SOUTH 51°09'57" EAST, 225.00 FEET ALONG SAID LOT LINE TO THE SOUTHEAST CORNER OF SAID LOT 33; THENCE SOUTH 38°50'00" WEST ALONG THE LOT LINE, 164.38 FEET, TO THE SOUTHWEST CORNER OF SAID LOT 33; THENCE NORTH 51°10'00" WEST ALONG THE LOT LINE, 393.42 FEET TO THE TRUE POINT OF BEGINNING.

3. I am the sole Trustee of the same trust under which said decedent held title as Trustee pursuant to the deed described above, and I am designated and empowered pursuant to the terms of said trust to serve as Trustee thereof.

Dated this 21st day of April, 2025.

JEFFREY DAGEENAKIS, Sole Trustee

STATE OF UTAH)
ss.
COUNTY OF WASHINGTON)

SUBSCRIBED AND SWORN TO before me this 21 day of April, 2025, by JEFFREY DAGEENAKIS, Sole Trustee of the Jeffrey John Dageenakis and Nicole Pino Revocable Trust dated September 18, 2019, proved to me on the basis of satisfactory evidence.

SEAL

ERIN RUNOLFSON
Notary Public, State of Utah
Commission # 722075
My Commission Expires
December 21, 2025

NOTARY PUBLIC
Residing at: St. George, Utah
12/21/2025 Commission Expiration

STATE OF UTAH

CERTIFICATION OF VITAL RECORD

CERTIFICATE OF DEATH

State File Number: 2024008125

Nicole Pino

DECEDENT INFORMATION

Date of Death:	May 10, 2024	Time of Death:	00:37
City of Death:	Virgin	County of Death:	Washington
Age:	55	Date of Birth:	April 23, 1969
Place of Birth:	Provo, Utah	Sex:	Female
Armed Services:	Unknown	Marital Status:	Married
Spouse's Name:	Jeffrey John Dageenakis	Usual Occupation:	Photographer
Industry/Business:	Photography	Education:	High School or GED
Residence:	Virgin, Utah	Father's Name:	Leland Tony Pino
Mother's Name:	Janet Hunter	Facility Type:	Home
Facility or Address:	147 South Rulon Road		

INFORMANT INFORMATION

Name:	Jeffrey John Dageenakis	Relationship:	Husband
Mailing Address:	147 South Rulon Road, Virgin, Utah 84779		

DISPOSITION INFORMATION

Method of Disposition:	Cremation
Place of Disposition:	Metcalf Mortuary & Cremation Center, St George, Utah
Date of Disposition:	May 15, 2024

FUNERAL HOME INFORMATION

Funeral Home:	Metcalf Mortuary
Address:	288 West St George Blvd, St George, Utah 84770
Funeral Director:	Ryan Gabriel Carpenter

MEDICAL CERTIFICATION

Certifying Physician: Justin M. Lohmann DO, Utah Office of the Medical Examiner, 4451 South 2700 West, Taylorsville, Utah 84129

CAUSE OF DEATH

Peritonitis
Due to (or as a consequence of): Bowel perforation
Due to (or as a consequence of): Pseudomembranous colitis
Due to (or as a consequence of): Clostridium difficile infection
Tobacco Use: Unknown if User
Medical Examiner Contacted: Yes Autopsy Performed: Yes Autopsy Available: Yes Manner of Death: Natural

Date Registered: May 14, 2024
Date Issued: August 14, 2024

AMENDMENT HISTORY

07/08/2024 Immediate Cause of Death from **Pending** to **Peritonitis**
07/08/2024 Additional Cause of Death 1 from **(blank)** to **Bowel perforation**
07/08/2024 Additional Cause of Death 2 from **(blank)** to **Pseudomembranous colitis**
07/08/2024 Underlying Cause of Death from **(blank)** to **Clostridium difficile infection**
07/08/2024 Manner Of Death from **Pending** to **Natural**
07/08/2024 Injury At Work from **Unknown** to **(blank)**

This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics.
Security features of this official document include: Intaglio Border, V & R Images in top cycloids, and Intaglio microtext.
This document displays the date, seal and signature of the Utah State Registrar of Vital Record and Statistics.

Linda S. Wininger, MSW, LCSW
State Registrar
Rev. 12/20

0679733 11

David W. Blodgett, MD, MPH
Director/Health Officer

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Utah Department of **Health & Human** Services

Office of Vital Records and Statistics
Affidavit to amend a record

Corrections to a vital record may be made by affidavit but an item on a birth record may be corrected by affidavit only once. A court order is required for gender or name changes after the age of one year. This form is not used with a court order. A court order is necessary to make any corrections to a Delayed Birth Certificate. This affidavit cannot be used to correct medical information. Many changes, including marital status, require more information; visit our website or contact our office. Please return any copies of the certificate with this completed affidavit and all supporting documentation. If corrected certificates are reissued within 90 days of issuance, the new certificate fee will be waived but affidavit fees may still apply. This affidavit may be mailed with the correct fees, proof of ID, and application for a new certificate.

online instructions

Mailing Address: Office of Vital Records and Statistics PO Box 141012 Salt Lake City, UT 84114-1012
Contact Info: https://VitalRecords.utah.gov 801-538-6105 vrequest@utah.gov

Affidavit Instructions: Please print or type. **Items 1-6**: Enter the facts as reported on the current vital record. **Item 7**: Enter the item number from items 1-6 that will be changed, if applicable. **Item 8a**: Enter the information as stated on the original record. **Item 8b**: Enter the correct information as it should be stated. **Item 9**: Enter the reason the change is necessary. **Item 10**: Enter the proofs used to support the change. The proofs must match the asserted fact(s) exactly. Proofs must be submitted with the affidavit. **Items 11-22**: Enter witness information.

Witnesses for Birth Certificate: If the person listed on the record is under 18 years of age, both parents of record MUST sign the affidavit. If only one parent is listed, the second witness MUST be an immediate family member of the listed parent. If the person listed on the record is 18 years of age or older, he/she MUST sign as one of the witnesses. The second witness MUST be their immediate family member.

Witnesses for Death Certificate: The informant and an immediate family member, or two immediate family members, must sign as a witness. If adding a spouse, the spouse must sign as a witness. If no immediate family, a person who is knowledgeable of the facts may sign.

[ ] Birth [ ] Death [ ] Stillbirth State file number: _____

Information as reported on the record

1a. First name	1b. Middle name	1c. Last name
2. Sex	3. Date of event	4. Place of occurrence (City and County)
5. Name of parent 1 (Maiden name if applicable)		6. Name of parent 2 (Maiden name if applicable)

Statement of amendments

7. Item no.	8a. Facts exactly as on original record	8b. Correct information

Why the change is needed: 9

Documents used: 10

Oath of first witness

I hereby certify under penalty of perjury, that I have personal knowledge of the above facts and that the information given is true and correct.

11a. Signature of witness (Must sign in front of notary)	11b. Printed name of witness		
12. Date signed	13. Age of witness	14. Telephone number	15. Relationship to 1a.
16. Address of witness			

Subscribed to and Sworn to before me this ___ day of ___ 20___.
State _____ County _____
Notary signature _____
SEAL

Oath of second witness

I hereby certify under penalty of perjury, that I have personal knowledge of the above facts and that the information given is true and correct.

17a. Signature of witness (Must sign in front of notary)	17b. Printed name of witness		
18. Date signed	19. Age of witness	20. Telephone number	21. Relationship to 1a.
22. Address of witness			

Subscribed to and sworn to before me this ___ day of ___ 20___.
State _____ County _____
Notary signature _____
SEAL