

WHEN RECORDED AND FOR TAX NOTICES MAIL TO:
Horton Family Trust
C/O: Suzanne Rengers
7987 Larsen Meadow Lane
West Jordan, UT 84088

ENT 84182:2024 PG 1 of 4
ANDREA ALLEN
UTAH COUNTY RECORDER
2024 Nov 27 02:29 PM FEE 40.00 BY KR
RECORDED FOR Cottonwood Title Insurance
ELECTRONICALLY RECORDED

File No.: 143714-WHP

SUCCESSOR TRUSTEE AFFIDAVIT

I, the undersigned William Todd Horton and Suzanne Rengers as Successor Co-Trustee, do hereby affirm the following:

1. The copy of the trust document provided to Cottonwood Title Insurance Agency, Inc. is a true and correct copy of the trust agreement or certification of trust of Horton Family Trust, dated May 4, 1994 (the "Trust"). The Trust is in full force and effect, and it has not been revoked or terminated.
2. We were well and personally acquainted with Frank Arnold Horton, a trustee named in that certain Affidavit of Survivorship recorded July 19, 2017 as Entry No. 69434:2017 in the records of the Utah County Recorder.
3. We know of our own knowledge that Frank Arnold Horton in the aforementioned affidavit and Frank Arnold Horton mentioned in the attached Certificate of Death was one and the same person.
4. Pursuant to the terms of the Trust and the successor trustee provisions therein, we have been duly appointed and named as successor co-trustees of the Trust.
5. We have full power to convey title, sell, encumber, or enter into any contract pertaining to real property currently held in the Trust. Said property is located in Utah County, State of Utah (the "Property"), and is more particularly described as:

See Exhibit A attached hereto and made a part hereof

TAX ID NO.: 21-027-0038 (for reference purposes only)

6. The Trust has not been terminated or amended in any way to restrict our ability to convey title to or a portion of title to, or to encumber the Property.
7. We are the current successor co-trustees of the Trust, and there are no new successor trustees.
8. In light of the foregoing facts, the undersigned, in consideration of the issuance by First American Title Insurance Company of a policy of Title Insurance covering the said Property in the manner described, hereby promises, covenants and agrees to hold harmless, protect and indemnify Cottonwood Title Insurance Agency, Inc. and First American Title Insurance Company against any liabilities, losses, damages, expenses and charges that may arise as a result of reliance on this Affidavit.

Signed this NOV. 25, 2024

[Signature page follows]

William Todd Horton
William Todd Horton, Successor Co-Trustee

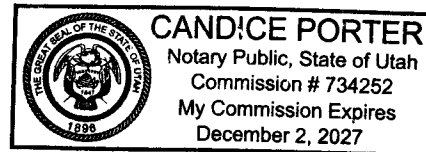
Suzanne Rengers
Suzanne Rengers, Successor Co-Trustee

STATE OF Utah

COUNTY OF Salt Lake

Subscribed and sworn to before me this November 25, 2024, by William Todd Horton.

Candice Porter
Notary Public



STATE OF Utah

COUNTY OF Salt Lake

Subscribed and sworn to before me this November 25, 2024, by Suzanne Rengers.

Candice Porter
Notary Public

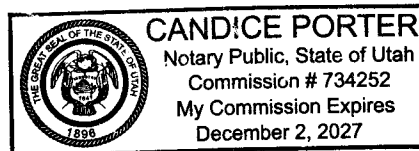


EXHIBIT A

Commencing South 1657.12 feet and West 239.5 feet from the Northwest corner of Section 4, Township 7 South, Range 2 East, Salt Lake Base and Meridian; thence South 89°42'36" East 1726.99 feet; thence North 01°42'42" West 47.44 feet; thence North 63°21'14" East 8.24 feet; thence South 84°36'47" East 210.89 feet; thence South 88°37'36" East 77.71 feet; thence South 81°29'49" East 281.57 feet; thence South 54°01'53" East 55.51 feet; thence South 47°17'38" East 39.58 feet; thence South 40°45'40" East 64.47 feet; thence South 34°39'57" East 39.94 feet; thence South 25°19'24" East 198.2 feet; thence South 21°55'44" East 76.89 feet; thence North 89°53'11" West 927.36 feet; thence South 02°39'32" East 11.27 feet; thence North 89°53'12" West 415.45 feet; thence South 1.01 feet; thence North 89°53'12" West 277.66 feet; thence North 89°45'43" West 1090.98 feet; thence North 15°34'45" East 125.61 feet; thence North 18°47'22" East 48.57 feet; thence North 26°26'07" East 156.09 feet; thence North 20°22'12" East 94.14 feet; thence North 19°46'49" East 23.44 feet to the beginning.

TOGETHER WITH the following:

A 16.5 foot wide right-of-way in favor of F. Arnold Horton and Kathleen Ann Horton, Dell B. Walker and Jo Ann H. Walker and the Robins Family Trust, the centerline of which right-of-way is described as follows:

Beginning at a point on the North line of the Boat Harbor Drive, which beginning point is South 2657.89 feet and East 1527.73 feet (Based upon the Utah State Plane Coordinate System, Central Zone, bearings of Section lines, Nad 27) from the Northwest Corner of Section 4, Township 7 South, Range 2 East, Salt Lake Base and Meridian; thence by the following 6 (Six) courses: (1) North 2°44'31" West 590.54 feet; (2) thence North 1°42'42" West 449.79 feet; (3) thence North 25°39'28" West 115.84 feet; (4) thence North 24°35'11" West 106.09 feet; (5) thence North 7°30'11" West 137.22 feet; (6) thence North 3°15'15" East 139.51 feet, more or less, to the South property line of the Robins Family Trust Property.

STATE OF UTAH
CERTIFICATION OF VITAL RECORD

ENT 84182:2024 PG 4 of 4

CERTIFICATE OF DEATH

State File Number: 2022001952

Frank Arnold Horton

DECEDENT INFORMATION

Date of Death:	January 27, 2022	Time of Death:	00:16
City of Death:	Murray	County of Death:	Salt Lake
Age:	84	Date of Birth:	May 20, 1937
Place of Birth:	Provo, Utah	Sex:	Male
Armed Services:	No	Marital Status:	Widowed
Spouse's Name:	Kathleen Arnold (Deceased)	Usual Occupation:	Heavy Equipment Operator
Industry/Business:	Construction	Education:	Some College but No Degree
Residence:	Salt Lake City, Utah	Father's Name:	Glen Horton
Mother's Name:	Dorothy Taylor	Facility Type:	Hospital Inpatient
Facility or Address:	Intermountain Medical Center		

INFORMANT INFORMATION

Name:	Suzanne Rengers	Relationship:	Daughter
Mailing Address:	7987 Larsen Meadow Lane, West Jordan, Utah 84088		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Mountain View Memorial Estates, Salt Lake City, Utah
Date of Disposition:	February 5, 2022

FUNERAL HOME INFORMATION

Funeral Home:	Jenkins-Soffe Mortuary - Murray
Address:	4780 South State Street, , Murray, Utah 84107
Funeral Director:	Jordan R Hager FH Director

MEDICAL CERTIFICATION

Certifying Physician:	John J Bowler DO, Intermountain Medical Center, 5121 South Cottonwood Street, Salt Lake City, Utah 84157
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CAUSE OF DEATH

Heart Failure

Due to (or as a consequence of): Aortic Valve Disease

Due to (or as a consequence of): Renal Failure


Tobacco Use: Unknown

Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

Date Registered: January 28, 2022

Date Issued: January 28, 2022

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: High Resolution Border, V & R Images in top cycloids, and microtext.
This document displays the date, seal, and signature of the Utah State Registrar of Vital Records and Statistics.


Linda S. Wininger LCSW
State Registrar
Rev. 4/19



066571052

UTAH DEPARTMENT OF HEALTH
Office of Vital Records & Statistics
Salt Lake City, Utah



(the “**Property**”), is currently vested in the name of **Frank Arnold Horton and Kathleen Ann Horton Trustees of the Horton Family Trust Dated May 4, 1994**, pursuant to a Warranty Deed recorded on September 2, 2005, on the records of the Utah County Recorder, as Entry No. 98383:2005.

3. Due to the death of Kathleen Ann Horton, Frank Arnold Horton, became the surviving Trustee of the Horton Family Trust Dated May 4, 1994, which Trust was and still is the sole owner of the Property.

5. Pursuant to the terms of the Trust, Suzanne Rengers was added as a co-trustee of the Trust. Accordingly, the Trustees are now Frank Arnold Horton and Suzanne Rengers and the format for taking title to assets is:

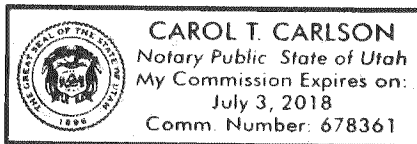
Frank Arnold Horton and Suzanne Rengers, Trustees of the Horton Family Trust, dated May 4, 1994, and any amendments thereto.

Dated: July 19, 2017

Frank Arnold Horton
**Frank Arnold Horton, Trustee of the
Horton Family Trust Dated May 4, 1994**

STATE OF UTAH)
) ss.
COUNTY OF SALT LAKE)

On this 19th day of July, 2017, before me personally appeared Frank Arnold Horton, Trustee, proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he executed the same.



Carol T. Carlson
Notary Public

EXHIBIT "A"
DEATH CERTIFICATE OF
KATHLEEN ANN HORTON

STATE OF NEVADA

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH - VITAL STATISTICS

CERTIFICATE OF DEATH

2015000867

STATE FILE NUMBER

TYPE OR
PRINT IN
PERMANENT
BLACK INK

DECEDENT

IF DEATH
OCCURRED IN
INSTITUTION SEE
HANDBOOK
REGARDING
COMPLETION OF
RESIDENCE
ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF
DEATHCONDITIONS IF
ANY WHICH
HAVE RISE TO
IMMEDIATE
CAUSE
STATING THE
UNDERLYING
CAUSE LAST

1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) Kathleen Ann HORTON		2. DATE OF DEATH (Mo/Day/Year) January 18, 2015		3a. COUNTY OF DEATH Clark	
3b. CITY, TOWN, OR LOCATION OF DEATH Mesquite		3c. HOSPITAL OR OTHER INSTITUTION -Name(If not either, give street and) 455 Mesa Blvd. #101		3e. If Hosp. or Inst. indicate DOA,OP/Emer. Rm. Inpatient(Specify) Home	
4. SEX Female		5. RACE White (Specify)		6. Hispanic Origin? Specify No - Non-Hispanic	
7a. AGE-Last birthday (Years) 80		7b. UNDER 1 YEAR MOS		7c. UNDER 1 DAY HOURS	
8. DATE OF BIRTH (Mo/Day/Yr) December 07, 1934		9a. STATE OF BIRTH (If not U.S.A., Utah		9b. CITIZEN OF WHAT COUNTRY United States	
10. EDUCATION 14		11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		12. SURVIVING SPOUSE (Maiden name) Frank Arnold HORTON	
13. SOCIAL SECURITY NUMBER 528-42-6942		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Lunchroom Program		14b. KIND OF BUSINESS OR INDUSTRY Education	
15a. RESIDENCE - STATE Utah		15b. COUNTY Clark		15c. CITY, TOWN OR LOCATION Mesquite	
15d. STREET AND NUMBER 455 Mesa Blvd. #101		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes			
16. FATHER/PARENT - NAME (First Middle Last Suffix) Louis Duane RASMUSSEN		17. MOTHER/PARENT - NAME (First Middle Last Suffix) Violet PETERSEN			
18a. INFORMANT- NAME (Type or Print) Frank Arnold HORTON		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 1101 Chevy Chase Circle Salt Lake City, Utah 84117			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Removal/Burial		19b. CEMETERY OR CREMATORY - NAME Mountain View Memorial Estates		19c. LOCATION City or Town State Cottonwood Heights Utah	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) BRIAN REBMAN		20b. FUNERAL DIRECTOR LICENSE NUMBER 49		20c. NAME AND ADDRESS OF FACILITY Moapa Valley Mortuary 5090 N Moapa Valley Blvd Logandale NV 89021	
20d. SIGNATURE AUTHENTICATED					
TRADE CALL - NAME AND ADDRESS Jenkins-Soffe Mortuary 4760 S. State St. Murray UT 84107					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.(Signature & Title) LARY SIMMS DO, MPH		22a. On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) LARY SIMMS DO, MPH			
21b. DATE SIGNED (Mo/Day/Yr) January 21, 2015		21c. HOUR OF DEATH 11:55		22b. DATE SIGNED (Mo/Day/Yr) January 21, 2015	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) January 18, 2015		21e. PRONOUNCED DEAD (Mo/Day/Yr) January 18, 2015		22e. PRONOUNCED DEAD AT (Hour) 11:55	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Lary Simms DO, MPH 1704 Pinto Lane Las Vegas, NV 89106				23b. LICENSE NUMBER 880	
24a. REGISTRAR (Signature) SUSAN ZANNIS		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) January 22, 2015		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) Arteriosclerotic Cardiovascular Disease		Interval between onset and death			
(a) DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death			
(b) DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death			
(c) DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death			
(d)					
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1. Diabetes Mellitus				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes					
28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY	
28d. DESCRIBE HOW INJURY OCCURRED					
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY- At home, farm, street, factory, office building, etc (Specify)		28g. LOCATION STREET OR R.F.D. No CITY OR TOWN STATE	

STATE REGISTRAR

ENT 69434 : 2017 PG 4 of 4

VRS-Rev-20120523a

"CERTIFIED TO BE A TRUE AND CORRECT COPY OF THE DOCUMENT ON FILE WITH THE REGISTRAR OF VITAL STATISTICS, STATE OF NEVADA." This copy was issued by the Southern Nevada Health District from State certified documents authorized by the State Board of Health pursuant to NRS 440.175.

B000082575

DATE ISSUED: JAN 23 2015

Registrar of Vital Statistics

By: *[Signature]*

This Copy not valid unless prepared on engraved border displaying date, seal and signature of Registrar.
SOUTHERN NEVADA HEALTH DISTRICT • P.O. Box 3902 • Las Vegas, NV 89127 • 702-759-1010 • Tax ID # 88-0151573

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

