

CERTIFICATE OF TRUST

UPON OATH, IT IS HEREBY CERTIFIED that:

Name: _____

Social Security Number: _____

Name: _____

Social Security Number: _____

is/are entitled to the use and occupancy as to an equitable life estate in the real property under the terms of the:

Name of Trust: _____

Date: _____

and therefore hold sufficient title to claim a Homestead Exemption in compliance with Section 196.041(2), Florida Statutes; and Rule 12D-7.011, Florida Administrative Code, on the property set forth below:

Property Identification #: _____

Property Address: _____

City: _____ Zip: _____

SIGNATURE OF TRUSTEE

PRINTED NAME OF TRUSTEE

State of _____

County of _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____
by _____, who is personally known to me or produced
_____ as identification, and who did take an oath.

(SEAL)

Notary Public

Print Name