20110610000171880 1/3 $18.00
Shelby Cnty Judge of Probate, AL
06/10/2011 01:00:32 PM FILED/CERT

Recording Requested by:
LUANN C. BEBERMAN, ESQ.
When recorded, mail to:

Name: DANIEL J. DICARLO

Mailing Address: 7676 HAZARD CENTER DRIVE
SUITE 500

City, State, Zip Code: SAN DIEGO, CA 92108

Space above this line reserved for Recorder's use

AFFIDAVIT DEATH OF TRUSTEE/TRUSTOR

A.P.N.

State of California)
) ss.
County of San Diego)

DANIEL J. DICARLO, Trustee, of legal age, being first duly sworn, deposes and says:

That SALVADOR S. SANCHEZ, the decedent mentioned in the attached certified copy of death, is the same person as SALVADOR S. SANCHEZ and named as a Trustee in that certain declaration of trust dated August 27, 2008, and who executed the Grant Deed transferring title from SALVADOR S. SANCHEZ, an unmarried man to SALVADOR S. SANCHEZ Trustee of the SALVADOR S. SANCHEZ 2008 TRUST, dated August 27, 2008, and originally recorded by error in the Official Recorder of the Judge of Probate for Jefferson County on September 26, 2008, as Instrument No. 2008 092600133673, Book LR 2000810, Page 26551 and re-recorded with the Judge of Probate for Shelby County concurrently with this Affidavit as the trust estate includes interests in real property located in Shelby County, as follows:

MORE SPECIFICALLY DESCRIBED IN THE ATTACHED EXHIBIT "A" ATTACHED HERETO AND BY THIS REFERENCE MADE A PART HEREOF.

COMMONLY KNOWN AS: 5243 Hwy. 280 South, Birmingham, Alabama (IHOP)

I, Daniel J. DiCarlo, am named successor Trustee under the above-referenced Trust, which was in effect at the time of the death of the Decedent mentioned above, and which has not been revoked, and I hereby consent to act as such.

I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct.

Dated: June 7th, 2011

DANIEL J. DICARLO, Successor Trustee of the
SALVADOR S. SANCHEZ 2008 TRUST

STATE OF CALIFORNIA)
COUNTY OF SAN DIEGO)

Subscribed and sworn to (or affirmed) before me this 7TH day of June, 2011, by DANIEL J. DICARLO, proved to me on the basis of satisfactory evidence) to be the person(s) who appeared before me.

Notary Public in and for said County & State

LUANN C. BEBERMAN
Commission # 1933995
Notary Public - California
San Diego County
My Comm. Expires May 24, 2015

(S E A L)

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A.P.N.

EXHIBIT "A"

PARCEL1:

LOTS 28, ACCORDING TO THE MAP AND SURVEY OF BROOK HIGHLAND PLAZA RESURVEY, RECORDED IN MAP BOOK 18, PAGE 99, IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA.

PARCEL 2:

(A) PERPETUAL, NON-EXCLUSIVE EASEMENTS, APPURTENANT TO PARCEL 1, FOR VEHICULAR AND PEDESTRIAN INGRESS AND EGRESS, VEHICULAR PARKING, UTILITY LINES AND FACILITIES, AND STORMWATER DRAINAGE, OVER, UNDER AND ACROSS CERTAIN PORTIONS OF THAT CERTAIN ADJOINING PROPERTY, AS SET FORTH AND DESCRIBED IN THAT CERTAIN BASEMENT AGREEMENT DATED DECEMBER 30, 1994, BY AND BETWEEN BROOK HIGHLAND LIMITED PARTNERSHIP, A GEORGIA LIMITED PARTNERSHIP AND DEVELOPERS DIVERSIFIED OF ALABAMA, INC., AN ALABAMA CORPORATION, RECORDED IN INSTRUMENT NUMBER 1995-27233, IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA, AS AFFECTED BY THAT CERTAIN "AGREEMENT RE ACCESS EASEMENT" DATED NOVEMBER 13, 1998, BY AND BETWEEN BROOK HIGHLAND LIMITED PARTNERSHIP, A GEORGIA LIMITED PARTNERSHIP AND IHOP REALTY CORP., A DELAWARE CORPORATION, AS RECORDED IN INSTRUMENT #1998-46413, IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA.

(B) PERPETUAL, NON-EXCLUSIVE EASEMENT, APPURTENANT TO PARCEL 1, FOR UTILITY LINES, OVER, UNDER AND ACROSS CERTAIN PORTIONS OF THAT CERTAIN ADJOINING PROPERTY, AS SET FORTH AND DESCRIBED IN THAT CERTAIN RECIPROCAL BASEMENT AGREEMENT DATED AUGUST 9, 1988, BY AND AMONG BILLY D. EDDLEMAN AND DOUGLAS D. EDDLEMAN, EDDLEMAN & ASSOCIATES, AN ALABAMA GENERAL PARTNERSHIP AND AMSOUTH BANK, N.A. AS ANCILLARY TRUSTEE FOR NCNB NATIONAL BANK OF NORTH CAROLINA, AS TRUSTEE OF THE PBULIC EMPLOYEES RETIREMENT SYSTEM OF OHIO, RECORDED IN RE3AL VOLUME NO. 199, PAGE 18, IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA.

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SAN DIEGO

CERTIFICATE OF DEATH

STATE OF CALIFORNIA

USE BLACK INK ONLY - NO ERASURES, WHITEOUTS OR ALTERATIONS

VS-11REV 1/04)

STATE FILE NUMBER

3200837018038

LOCAL REGISTRATION NUMBER

DECEDENT'S PERSONAL DATA

1. NAME OF DECEDENT — FIRST (Given)	2. MIDDLE	3. LAST (Family)
SALVADOR	SALDIVAR	SANCHEZ

AKA ALSO KNOWN AS — Include full AKA (FIRST, MIDDLE, LAST)	4. DATE OF BIRTH mm/dd/ccyy	5. AGE Yrs.	IF UNDER ONE YEAR: Months / Days	IF UNDER 24 HOURS: Hours / Minutes	6. SEX
-	10/04/1924	84			M

9. BIRTH STATE/FOREIGN COUNTRY	10. SOCIAL SECURITY NUMBER	11. EVER IN U.S. ARMED FORCES?	12. MARITAL STATUS (at Time of Death)	13. DATE OF DEATH mm/dd/ccyy	14. HOUR (24 Hours)
CA	[redacted]	[X] YES [ ] NO [ ] UNK	DIVORCED	12/01/2008	0245

15. EDUCATION — Highest Level/Degree (see worksheet on back)	16. 15. WAS DECEDENT HISPANIC/LATINO/A/SPANISH? (If yes, see worksheet on back)	16. DECEDENT'S RACE — Up to 2 races may be listed (see worksheet on back)
05	[X] YES MEXICAN AMERICAN [ ] NO	MEXICAN AMERICAN

17. USUAL OCCUPATION — Type of work for most of life. DO NOT USE RETIRED	18. KIND OF BUSINESS/INDUSTRY (e.g., grocery store, state construction, employment agency, etc.)	19. YEARS IN OCCUPATION
INVESTOR	COMMERCIAL REAL ESTATE	70

USUAL RESIDENCE

20. DECEDENT'S RESIDENCE (Street and number or location)				
1550 JEFFREY AVE.				
21. CITY	**22. COUNTY/PROVINCE**	**23. ZIP CODE**	**24. YEARS IN COUNTY**	**25. STATE/FOREIGN COUNTRY**
ESCONDIDO	SAN DIEGO	92027	20	CA

INFORMANT

26. INFORMANT'S NAME, RELATIONSHIP	27. INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state, ZIP)
KEN SANCHEZ, SON	1758 RANCH RD., AZUSA, CA 91702

SPOUSE AND PARENT INFORMATION

28. NAME OF SURVIVING SPOUSE — FIRST	29. MIDDLE	30. LAST (Maiden Name)	
-	-	-	
31. NAME OF FATHER — FIRST	**32. MIDDLE**	**33. LAST**	**34. BIRTH STATE**
SALVADOR	-	SANCHEZ	CA
35. NAME OF MOTHER — FIRST	**36. MIDDLE**	**37. LAST (Maiden)**	**38. BIRTH STATE**
GUADALUPE	-	SALDIVAR	MEXICO

FUNERAL DIRECTOR/ LOCAL REGISTRAR

39. DISPOSITION DATE mm/dd/ccyy	40. PLACE OF FINAL DISPOSITION
12/05/2008	CALVARY CEMETERY 4201 WHITTIER BLVD., LOS ANGELES, CA 90023

41. TYPE OF DISPOSITION(S)	42. SIGNATURE OF EMBALMER	43. LICENSE NUMBER
BU	▸ RUBEN SUAREZ	EMB7593
44. NAME OF FUNERAL ESTABLISHMENT	**45. LICENSE NUMBER**	**46. SIGNATURE OF LOCAL REGISTRAR** / **47. DATE mm/dd/ccyy**
BAGUES AND SONS MORTUARIES INC	FD560	▸ WILMA WOOTEN, MD — 12/02/2008

PLACE OF DEATH

101. PLACE OF DEATH	102. IF HOSPITAL, SPECIFY ONE	103. IF OTHER THAN HOSPITAL, SPECIFY ONE
RESIDENCE	[ ] IP [ ] ER/OP [ ] DOA	[ ] Hospice [ ] Nursing Home/LTC [X] Decedent's Home [ ] Other

104. COUNTY	105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location)	106. CITY
SAN DIEGO	1550 JEFFREY AVE.	ESCONDIDO

CAUSE OF DEATH

107. CAUSE OF DEATH — Enter the chain of events — diseases, injuries, or complications — that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.

		Time Interval Between Onset and Death	108. DEATH REPORTED TO CORONER?
IMMEDIATE CAUSE (Final disease or condition resulting in death) →	(A) METASTATIC MULTIPLE MYELOMA	(AT) YRS	[X] YES [ ] NO REFERRAL NUMBER: WV08-06640
Sequentially, list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST	(B)	(BT)	109. BIOPSY PERFORMED? [X] YES [ ] NO
	(C)	(CT)	110. AUTOPSY PERFORMED? [ ] YES [X] NO
	(D)	(DT)	111. USED IN DETERMINING CAUSE? [ ] YES [ ] NO

112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107

NONE

113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.)	113A. IF FEMALE, PREGNANT IN LAST YEAR?
NO	[ ] YES [ ] NO [ ] UNK

PHYSICIAN'S CERTIFICATION

114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since / Decedent Last Seen Alive	115. SIGNATURE AND TITLE OF CERTIFIER	116. LICENSE NUMBER	117. DATE mm/dd/ccyy
(A) 11/16/1999 / (B) 10/28/2008	▸ ROY ROBERT JOHNSON M.D.	G34973	12/02/2008
	118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE: ROY ROBERT JOHNSON M.D. 28743 VALLEY CENTER, VALLEY CENTER, CA 92082		

CORONER'S USE ONLY

119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH: [ ] Natural [ ] Accident [ ] Homicide [ ] Suicide [ ] Pending investigation [ ] Could not be determined	120. INJURED AT WORK? [ ] YES [ ] NO [ ] UNK	121. INJURY DATE mm/dd/ccyy	122. HOUR (24 Hours)

123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)

124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)

125. LOCATION OF INJURY (Street and number, or location and city and ZIP)

126. SIGNATURE OF CORONER / DEPUTY CORONER	127. DATE mm/dd/ccyy	128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER
▸		

STATE REGISTRAR	A	B	C	D	E		FAX AUTH. #	CENSUS TRACT
						01200800943615		

20110610000171880 3/3 $18.00
Shelby Cnty Judge of Probate, AL
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A01994816

County of San Diego – Department of Health Services – 3851 Rosecrans Street. This is to certify that, if bearing the OFFICIAL SEAL OF THE STATE OF CALIFORNIA, the OFFICIAL SEAL OF SAN DIEGO COUNTY AND THEIR DEPARTMENT OF HEALTH SERVICES EMBOSSED SEAL, this is a true copy of the ORIGINAL DOCUMENT FILED. Required fee paid.

DATE ISSUED: December 8, 2008

Wilma J. Wooten, M.D.

WILMA J. WOOTEN, MD
REGISTRAR OF VITAL RECORDS
County of San Diego

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar

MIDWEST BANK NOTE COMPANY

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICAT