CERTIFICATION OF TRUST

TO: ALL FINANCIAL INSTITUTIONS, MUTUAL FUND ADMINISTRATORS, TITLE INSURERS, TRANSFER AGENTS, AND OTHER PERSONS AND INSTITUTIONS

This certification confirms the establishment of an irrevocable trust named THE SHANNON FAMILY RESIDENCE TRUST (hereinafter referred to as the "Trust"). The following provisions are found in said Trust and may be relied upon as a full statement of the matters covered by such provision by anyone dealing with the original Trustee or a successor Trustee.

CERTIFICATION OF TRUST

The Trust was created concurrently herewith by a Trust Agreement executed by JAMES DEWEY SHANNON and DOLLIE R. SHANNON, as Trustors, and DAVID ALAN RICKARD and JAMES DEWEY SHANNON, JR., as co-Trustees (hereinafter referred to as the "Trustee").

TRUSTEE

The currently acting co-Trustees of the Trust are DAVID ALAN RIKARD and JAMES DEWEY SHANNON, JR. If DAVID ALAN RIKARD shall cease to act for any reason, he shall be succeeded by Dollie's granddaughter, LISA WILSON, 804 Ashley Lane, Allen, TX 75002, as his successor Trustee. If JAMES DEWEY SHANNON, JR., shall cease to act for any reason, he shall be succeeded by SHARON SHANNON AINSWORTH, 775 Signal Point Road, Guntersville, AL 35976, as his successor Trustee. SHARON SHANNON AINSWORTH shall cease to act for any reason, she shall be succeeded by SUSAN SHANNON SPRUIELL, 110 Ashlan Circle, Boaz, AL 35957, as her successor Trustee.

While co-trustees are acting, the signatures of both co-trustees shall be required in order to transact any business on behalf of the trust that exceeds $5,000.00 in total or exceeds $5,000.00 per month. Administrative expenses such as routine expenses of the trust, including taxes, insurance, maintenance and upkeep are exempted from this limitation

IRREVOCABILITY OF TRUST

The Trust is Irrevocable.

ADDRESS OF THE TRUST

The Trust uses the address of the co-Trustee as its location. This address is currently 2823 Highland Avenue South Apt. B, Birmingham, AL 35205.

TRUSTEE AUTHORITY

(1) A Trustee may appoint an Attorney-in-Fact ("Power of Attorney") and delegate to such agent the exercise of all or any of the powers conferred upon a Trustee.

(2) The Trustors intend for the trustee to be treated as they would regarding the use and disclosure of their individually identifiable health information or other medical records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 42 USC 1320d and 45 CFR 160-164. The Trustor authorizes any physician, healthcare professional, dentist, health plan, hospital, clinic, laboratory, pharmacy or other covered health provider, any insurance company and medical information bureau or other health care clearinghouse that has provided treatment or services or that has paid for or is seeking payment from the Trustors, or either of them, for such series to give, disclose, and release, either orally or in writing, to the Trustee or Trustees, without restriction, all of each Trustor's individually identifiable health information and medical records regarding any past, present or future medical or mental health condition.

The authority given to the Trustee shall supersede any prior agreement that the Trustors or either of them has made with their health care providers to restrict access to or disclosure of Trustors' individually identifiable health information. The authority given to the Trustee has no expiration date and shall expire only in the event that the Trustors, or either of them, revokes the authority in writing and delivers such revocation to such Trustor's health care providers.

(3) No purchaser from or other person dealing with a Trustee shall be responsible for the application of any purchase money or thing of value paid or delivered to such Trustee, but the receipt by a Trustee shall be a full discharge; and no purchaser of other person dealing with a Trustee and no issuer, or transfer agent, or other agent of any issuer of any securities to which any dealing with a Trustee should relate, shall be under any obligation to ascertain or inquire into the power of such Trustee to purchase, sell, exchange, transfer, mortgage, pledge, lease, distribute or otherwise in any manner dispose of or deal with any security or any other property held by such Trustee of comprised in the trust fund.

(4) The certification of a Trustee and/or the agent of a Trustee that such person is acting according to the terms of the trust shall fully protect all persons dealing with such Trustee and/or agent. Any person may rely upon the certification of any Trustee as to the matters which are not contained in this Certification of Trust, including a further enumeration of the Trustee's powers.

A person who acts in reliance on this Certification of Trust without knowledge that the representations contained in this Certification of Trust are incorrect is no liable to any person for so acting and may assume without inquiry the existence of the facts contained in this Certification. Knowledge of the terms of the Trust may not be inferred solely from the fact that a copy of all or part of the trust instrument is held by the person relying on the certification. A person who in good faith enters into a transaction in reliance on this Certification of Trust may enforce the transaction against the trust property as if the representations contained in this Certification of Trust were correct.

TRUSTEE'S POWERS

The Trustee shall have, in general, the power to do and perform any and all acts and things in relation to the trust fund in the same manner and to the same extent as an individual might or could do with respect to his or her own property including the power to buy, sell, hold, transfer, convey, or exercise any ownership rights in any asset for the Trust by executing any appropriate document, or by an oral demand to buy or sell a security; to maintain, deposit or to withdraw from any bank, brokerage or mutual fund account (including margin accounts), and to sign checks or drafts on any such account; to purchase or exercise rights in any life insurance of annuity contracts; and to borrow and pledge any Trust asset as security. In addition to the above, the Trustee shall have all of the powers authorized by the Alabama Uniform Trust Code (as though such powers were set from herein).

ADMINISTRATIVE PROVISIONS

(1) The Trust shall be administered according to the Alabama Uniform Trust Code, except as shall be specifically modified therein.

(2) The Trust has not been revoked, modified, or amended in any manner that would cause the representations contained in this Certification of Trust to be incorrect.

(3) The Certification of Trust is a true and accurate statement of the matters referred to herein concerting the Trust.

(4) This Certification of Trust has been signed by the currently acting co-Trustees of the Trust.

(5) Reproductions of this executed original (with reproduced signatures) shall be deemed to be original counterparts of this Certification of Trust and any person who is in possession of a photocopy of this executed Certification may, in good faith, rely upon the information it contains and shall not be liable to the Trustors, any Trustee or beneficiary for reliance upon the information herein contained.

(6) No person shall have received notice of any event upon which the use of this Certification of Trust depends unless said notice is in writing and until the notice is delivered to said person.

Executed on 11/4, 2024, in Jefferson (County), Alabama.

ACCEPTED on 11/4, 2024.

DAVID ALAN RIKARD
Co-Trustee

JAMES DEWEY SHANNON, JR.
Co- Trustee

Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County Clerk
Shelby County, AL
11/05/2024 10:32:02 AM
$15.00 DANIEL
20241105000344660

Allison S. Boyd

STATE OF Alabama)
) ss.
COUNTY OF Jefferson)

I, the undersigned, a Notary Public in and for said County in said State, hereby certify that James Dewey Sherman Jr., whose name(s) is/are signed to the foregoing, and who is/are known to me, acknowledged before me on this day that, being informed of the contents of the foregoing, he/she/they executed the same voluntarily on the day the same bears date.

Given under my had and official seal, this the 4th day of Nov., 2024.

JACK R. THOMPSON, JR.
My Commission Expires
October 31, 2028

NOTARY PUBLIC

My commission expires: 10/31/2028

STATE OF Alabama)
) ss.
COUNTY OF Jefferson)

I, the undersigned, a Notary Public in and for said County in said State, hereby certify that David Alan Rigsby, whose name(s) is/are signed to the foregoing, and who is/are known to me, acknowledged before me on this day that, being informed of the contents of the foregoing, he/she/they executed the same voluntarily on the day the same bears date.

Given under my hand and official seal, this the 4th day of Nov., 2024.

NOTARY PUBLIC

My commission expires: 10/31/2028

JACK R. THOMPSON, JR.
My Commission Expires
October 31, 2028