## TO BE COMPLETED BY ASSIGNOR(S) A.K.A. SELLER(S)

CERTIFICATION: Pursuant to A.R.S. Title 37 and the Rules of the Arizona State Land Department, A.A.C. Title 12, Chapter 5, you  $\underline{\text{must complete}}$  the following information pertinent to you and sign the certification. NOTE: Applicant  $\underline{\text{must}}$  complete item #1.

1.	Is this application made in the name of: (Applicant must check one)			Ind	Individual(s)		Husband & Wife			
	Corporation	Ltd. Liability Co.	Partnershi	pLtd	. Partnership	Estate	Trust			
	Joint Venture	Municipality	Political Su	ıbdivision	Other (specify) _					
2.	INDIVIDUAL(s) OR H	USBAND & WIFE: Compl	ete the following for ea	ch applicant:						
		NAME			AGE	MAR	RITAL STATUS			
3.	<ul><li>(B) Is the corporation</li><li>(C) In what state are y</li><li>(D) Is the legal corporation</li></ul>	ority from the Arizona Corp presently in good standing	with the Arizona Corpo ess address the same as	oration Comm	ission?  application?	Yes_	No No No			
	Address:	(C)			(01)	(0)				
		(Street or Box	Number)		(City)	(State	e) (Zip)			
4.	(A) If an out-of-state li Yes No  (B) If an Arizona limit Yes No  (C) Are you authorized	COMPANY: Complete the mited liability company: Hated liability company: Have d liability company: Have d by the Arizona Corporation	ave you filed for a Cert you filed Articles of O on Commission to trans	rganization w	ith the Arizona Corpora n Arizona? Yes No	tion Commissio				
5.	PARTNERSHIP OR JO	PARTNERSHIP OR JOINT VENTURE: Complete the following for each authorized partner or principal:								
	NAME		ADDRESS			AGE	MARITAL STATUS			
6.		HIP: Is this limited partner for the <u>authorized general p</u> NER(S) NAME		rizona Secreta	ry of State? Yes No					
7.		e following and attach a co		e document(s):						
		inted administrator or person	•							
	List the type and date of	f issuance of the court or Es	тате посишент:	(Type of	Document)		(Date issued)			
8.	TRUST: (A) Complete NAME	the following pursuant to A	ADDRESS		of the Trust:	AGE	MARITAL STATUS			
9.	I HEREBY CERTIFY,	t document by <u>title, docume</u> UNDER PENALTY OF PE AND ATTACHMENTS A	nt number, and county	where docum	nent is recorded:	S CONTAINEI	HEREIN, TOGETHER			
	DOCUMENT.	2		ΓURE(S)	3, 1, 1		- 2-2-1			
(Na	ame of Corporation, Parti	nership, etc.)		Signature of A	Assignor (Individual, Tr	ustee, Personal	Representative, etc			
Sign	nature		Title	Signature of A	Assignor (Individual, Tr	ustee, Personal	Representative, etc)			

(Signatures <u>must</u> be notarized on page 2)

## $\begin{array}{ll} \textbf{ASSIGNOR(S)} \ \textit{A.K.A.} \ \textit{SELLER(S)} \\ \textbf{NOTARY} \ \textbf{ACKNOWLEDGMENT} \end{array}$

STATE OF ARIZONA )	
County of) ss.	
On this day of	, 20 before me, a Notary Public within and for said
County, personally appeared	
and known to me to be the person(s) described i	in and who executed the same as free act and deed.
IN WITNESS WHEREOF, I hereunto set m	ıy hand and official seal.
My Commission Expires:	Notary Public
STATE OF ARIZONA ) ) ss. County of)	
	, 20 before me, a Notary Public within and for said
County, personally appeared	
and known to me to be the person(s) described i	in and who executed the same as free act and deed.
IN WITNESS WHEREOF, I hereunto set m	ny hand and official seal.
My Commission Expires:	
	Notary Public

## TO BE COMPLETED BY ASSIGNEE(S) A.K.A. BUYER(S)

CERTIFICATION: Pursuant to A.R.S. Title 37 and the Rules of the Arizona State Land Department, A.A.C. Title 12, Chapter 5, you must complete the following information pertinent to you and sign the certification. NOTE: Applicant must complete item #1.

1. Is this application made in the name of: (Applicant must check one) \_\_\_\_Individual(s) \_\_\_\_Husband & Wife \_\_\_\_Corporation \_\_\_\_Ltd. Liability Co. \_\_\_\_Partnership \_\_\_\_Ltd. Partnership \_\_\_\_Estate \_\_\_\_Trust \_\_\_\_\_Joint Venture \_\_\_\_Municipality \_\_\_\_Political Subdivision \_\_\_\_Other (specify) \_\_\_\_\_\_\_\_

	Corporation	Ltd. Liability Co.	Partnership	Ltd.	Partnership	Estate		Γrust
	Joint Venture	Municipality	Political Subdiv	vision	Other (specify	ı)		
2.	INDIVIDUAL(s) OR HU	USBAND & WIFE: Complete t	he following for each a	pplicant:				
		NAME			AGE		MAR	TITAL STATUS
3.	<ul><li>(B) Is the corporation p</li><li>(C) In what state are yo</li><li>(D) Is the legal corpora</li></ul>	rity from the Arizona Corporat presently in good standing with	the Arizona Corporati address the same as sta	on Commi ted in this	ssion? application?	rizona?	Yes_	No No No
	Address:	(Street or Box Nur	mher)		(City)		(State	e) (Zip)
4.	(A) If an out-of-state ling Yes No (B) If an Arizona limited Yes No	COMPANY: Complete the follomited liability company: Have you liability company: Have you liby the Arizona Corporation C	owing: You filed for a Certifica filed Articles of Organ	ization wi	tration with the Ariz	oration Co	oration (	Commission?
5.	PARTNERSHIP OR JOINT VENTURE: Complete the following for each authorized partner or principal:							
	NAME		ADDRESS				AGE	MARITAL STATUS
6.		HIP: Is this limited partnership for the <u>authorized general partr</u> NER(S) NAME	on file with the Arizon		y of State? Yes BUSINESS	_ No		
7.		e following <u>and attach a copy</u> of nted administrator or personal						
	List the type and date of	issuance of the court or Estate	document:	/TP 6				
					Document)			(Date issued)
8.	TRUST: (A) Complete t	the following pursuant to A.R.S	. § 33-404, for each <u>ber</u> ADDRESS	neficiary of	f the Trust:		AGE	MARITAL STATUS
	or (B) Identify the Trust	document by <u>title</u> , <u>document n</u>						
9.	I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN, TOGETH WITH ALL EXHIBITS AND ATTACHMENTS ARE TRUE, CORRECT AND COMPLETE AND THAT I/WE HAVE AUTHORITY TO SIGN TO DOCUMENT.  SIGNATURE(S)							HEREIN, TOGETHE ORITY TO SIGN THIS
(Na	me of Corporation, Partne	ership, etc.)	Sign	nature of A	ssignee (Individual,	Trustee, P	Personal	Representative, etc)
Sig	nature		Title Sign	ature of A	ssignee (Individual,	Trustee. P	Personal	Representative, etc)

(Signatures must be notarized on page 4)

## ASSIGNEE(S) A.K.A. BUYER(S) NOTARY ACKNOWLEDGMENT

STATE OF ARIZONA	)			
County of	) ss. )			
On this day of _		, 20	_ before me, a Notary Pub	lic within and for said
County, personally appeare	ed			
and known to me to be the	person(s) described i	in and who e	xecuted the same as	
IN WITNESS WHERE	OF, I hereunto set m	ny hand and	official seal.	
My Commission Expires: _		_	Notary Public	
STATE OF ARIZONA  County of	) ) ss. )			
		, 20	_ before me, a Notary Pub	lic within and for said
County, personally appeare	ed			
and known to me to be the <b>j</b>	person(s) described i	in and who e	xecuted the same as	
IN WITNESS WHERE	OF, I hereunto set m	ny hand and	official seal.	
My Commission Expires: _			Notary Public	
			1 total j i abile	