

**RECORDING REQUESTED BY:**  
Chicago Title Company

**Escrow Order No.:** OXN-01036

**When Recorded Mail Document To:**  
Mark De Leon, Successor Trustee of the Robert  
T. De Leon Trust dated October 3, 2002  
Attn: Mark De Leon  
222 San Emidio Street  
Taft Ca 93268

**DOC# 2023000062312**

09/18/2023  
Titles: 1 Pages: 4  
11:46 AM  
Total Fees: \$23.00  
ESPEJEV

APN/Parcel ID(s): 090-0-132-325

Exempt from fee per GC 27388.1 (a) (2); recorded  
concurrently "in connection with a transfer subject to the  
imposition of documentary transfer tax" E

### AFFIDAVIT OF DEATH OF TRUSTEE

Mark De Leon, of legal age, being first duly sworn, deposes and says:

1. That Robert T. De Leon, the decedent mentioned in the attached certified copy of Certificate of Death is the same person as Robert T. De Leon, named as the/a Trustee in that certain Declaration of Trust dated October 2, 2002, executed by Robert T. De Leon, as Trustor(s).
2. At the time of the demise of decedent, the decedent was the record owner, as Trustee; of real property commonly known as 11393 Azahar St, Ventura, CA 93004-3306, (Assessor's Parcel No. 090-0-132-325) which property is described in a Deed which was signed by Robert T. De Leon, a widower, as Grantor(s) to Robert T. De Leon, Trustee of the Robert T. De Leon dated October 3, 2002, on February 22, 2010, and recorded as Instrument No. 20140110-000033610 on January 10, 2014, of Official Records of Ventura County, State of California.
3. The legal description of the property is as follows:  
**For APN/Parcel ID(s): 090-0-132-325**

See legal description attached hereto and  
made a part of here of as exhibit "A"

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE CITY OF VENTURA, COUNTY OF VENTURA, STATE OF CALIFORNIA AND IS DESCRIBED AS FOLLOWS:

4. I/We, Mark De Leon, am/are the Surviving/Successor Trustee(s) under the above referenced Trust, which was in effect at the time of the death of the decedent.
5. I/We certify that the Trust instrument has not been revoked and is in full force and effect.
6. There is no federal estate tax due as a result of the death of decedent.

Dated: August 2, 2023

**AFFIDAVIT OF DEATH OF TRUSTEE**

(continued)

APN/Parcel ID(s): 090-0-132-325

Dated: August 2, 2023

IN WITNESS WHEREOF, the undersigned have executed this document on the date(s) set forth below.

Mark De Leon, Successor Trustee of the Robert T. De Leon Trust dated October 3, 2002

BY: *Mark De Leon*  
Mark De Leon, Successor Trustee

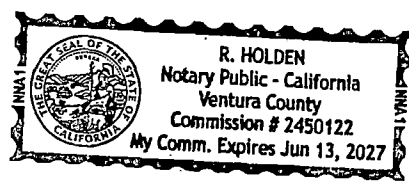
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of Ca.  
County of Ventura

Subscribed and sworn to (or affirmed) before me on this 2<sup>ND</sup> day of August, 2023 by Mark De Leon

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

*R. Holden*  
Signature



**EXHIBIT "A"**  
Legal Description

**For APN/Parcel ID(s): 090-0-132-325**

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LOTS 31 AND 32 IN BLOCK 44 AS THE SAME ARE DESIGNATED AND DELINEATED UPON THE MAP ENTITLED "AMENDED MAP OF TOWN OF SATICOY", IN THE COUNTY OF VENTURA, STATE OF CALIFORNIA, SAID MAP BEING RECORDED IN THE OFFICE OF THE COUNTY RECORDER OF SAID VENTURA COUNTY IN BOOK 5, MISCELLANEOUS RECORDS (MAPS) AT PAGE 36 ALSO SHOWN AS PARCEL A ON PARCEL MAP WAIVER MERGER RECORDED JULY 31, 2001 AS INSTRUMENT NO. 2001-0147898 OF OFFICIAL RECORDS

EXCLUDING UNTO GRANTOR HEREIN ALL OIL, GAS, MINERALS AND OTHER HYDROCARBON SUBSTANCES IN OR UNDER SAID LAND LYING BELOW A DEPTH OF 500 FEET FROM SURFACE THEREOF WITHOUT THE RIGHT TO ENTER THE SURFACE TO EXTRACT THE SAME.

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC HEALTH

3052023099861

CERTIFICATE OF DEATH

3202319022214

Form with sections: DECEDENT'S PERSONAL DATA, USUAL RESIDENCE, INFORMANT, SPOUSE/SURVIVING PARENT INFORMATION, FUNERAL DIRECTORY/LOCAL REGISTRAR, PLACE OF DEATH, CAUSE OF DEATH, PHYSICIAN'S CERTIFICATION, CORONER'S USE ONLY. Includes fields for name, date of birth, sex, education, occupation, residence, informant, spouse, funeral home, place of death, cause of death, physician signature, coroner signature.

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CERTIFIED COPY OF VITAL RECORD

STATE OF CALIFORNIA, COUNTY OF LOS ANGELES

This is a true certified copy of the record filed in the County of Los Angeles Department of Public Health if it bears the Registrar's signature in purple ink.



\* 0 0 3 8 8 3 7 5 8 \*

Signature of Health Officer and Registrar

MAY 12 2023

Health Officer and Registrar

DATE ISSUED

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

