

DESIGNATION OF SUCCESSOR TRUSTEE

State Of _____ County of _____

1. I/We have established the _____ Asset Management Trust; an irrevocable trust.

2. This Trust was created on _____.

3. The initial Trustee(s) is/are _____ and _____.

4. The initial Beneficiary(ies) is/are _____ and _____.

5. In the event that _____ or _____ is/are unable or unwilling to serve, then, and in that event, I/we designate _____ to serve as Successor Trustee to serve with all the rights, privileges and responsibilities as the original named Trustee(s).

6. On behalf of ourselves, our heirs and successors; we hereby agree to indemnify and hold harmless any third person or organization from any and all claims, demands, or liability whatsoever and from whomsoever which may arise or be occasioned in connection with, or arising out of the carrying out of the terms of this Trust by the original Trustee(s) or the Successor Trustee.

Dated: _____

Settlor/Beneficiary

Settlor/Beneficiary

Before me personally appeared the above named individual(s) and acknowledged that they executed this instrument in the capacity and for the purposes therein expressed.

WITNESS my hand and official seal this _____ day of _____, 20____.

Notary Public

My Commission expires: _____

Seal.

ACCEPTED:

Successor Trustee

Before me personally appeared the above named individual and acknowledged that he/she executed the above acceptance as his/her free and voluntary act.

WITNESS my hand and official seal this _____ day of _____, 20____.

Notary Public

My Commission expires: _____