Certificate of Trust

I/WE HEREBY CERTIFIED THAT	
is/are entitled to the use and occupancy of the following re	eal property for my/our lifetime(s) under
the terms of the	
(NAME OF TRU	ST)
Trust dated; and therefore h	nave sufficient equitable title to claim an
entitlement to homestead exemption pursuant to Section	196.041(2) of the Florida State Statutes
and Regulation 12D-7.011 of the Department of Revenue	, State of Florida.
Parcel Identification Number & Legal Description :	
Social Security #:	
	(Signature)
	(Printed Name)
Social Security #:	(Fillited Name)
	(Signature)
	(Printed Name)
State of	(
County of	
The foregoing instrument was acknowledged before me the	
byby me or who has/have produced	, wno is personally known
as identification, and who did take an oath.	
	Notary Public
(SEAL)	Print Name
(SEAL)	Fillit Name