

Title documents

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**RECORDING REQUESTED BY:
AND WHEN RECORDED MAIL TO:**

**JAMES M. A. MURPHY
Dentons US LLP
601 South Figueroa Street, Suite 2500
Los Angeles, CA 90017-5704**

19119826



Batch Number: 11317254



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AFFIDAVIT OF DEATH OF TRUSTEE

**RECORDING REQUESTED BY AND
WHEN RECORDED MAIL TO:**

JAMES M.A. MURPHY
DENTONS US LLP
601 S. Figueroa St., Suite 2500
Los Angeles, CA 90017

-----SPACE ABOVE FOR RECORDER'S USE-----

AFFIDAVIT OF DEATH OF TRUSTEE

APN: 2049-002-030

STATE OF CALIFORNIA)
)
) ss.
COUNTY OF LOS ANGELES)

JANE OKIN CHANG, RITA OKYUN LEE and ROBERT ILYONG CHOI, of legal age,
being first duly sworn, depose and say as follows:

1. JANE OKIN CHANG, RITA OKYUN LEE and ROBERT ILYONG CHOI are the
successor co-trustees of the Survivor’s Trust (sometimes referred to herein as the
“Choi Family Survivor’s Trust”) and the Exemption Trust (sometimes referred to
herein as the “Choi Family Exemption Trust”), each of which was established pursuant
to The Choi Family Trust under declaration of trust dated July 20, 2000 (“The Choi
Family Trust”).

2. MOON ZA CHOI, as surviving co-trustee of The Choi Family Trust, transferred, by *Individual Quitclaim Deed* dated July 30, 2007, recorded on September 10, 2007 as Instrument No. 20072088477, to MOON ZA CHOI, as Trustee of The Choi Family Survivor's Trust effective June 11, 2007, a **50% undivided interest**, and to MOON ZA CHOI, as Trustee of the Choi Family Exemption Trust, a **50% undivided interest**, in the real property located in Los Angeles County, California, commonly known as 5510 Jed Smith Road, Hidden Hills, California 91302, and more particularly described as follows:

PARCEL 1:

Lot 17 of Tract No. 22423, as per map recorded in Book 733, Pages 3 to 6 inclusive of Maps, in the office of the County Recorder of said County.

PARCEL 2:

An easement for road purposes to be used in common with others over Lewis and Clark Road, Jacob Hamblin Road, Robert Guy Road, as shown upon the map of Tract No. 22423, as per map recorded in Book 733, Pages 3 to 6 inclusive of Maps, and over Jed Smith Road and Round Meadow Road, as shown on record of survey map filed in Book 72 pages 3 to 6, Record of Surveys, and over Long Valley Road, as shown on record of map filed in Book 65, Page 20 of record of surveys, all being in the City of Hidden Hills, County of Los Angeles, State of California.

3. MOON ZA CHOI died on December 15, 2019. A certified copy of the *Death Certificate* for MOON ZA CHOI is attached hereto as **Exhibit "A."**

4. Pursuant to the terms of The Choi Family Trust, upon the death of MOON ZA CHOI, JANE OKIN CHANG, RITA OKYUN LEE and ROBERT ILYONG CHOI became the successor co-trustees of The Choi Family Survivor's Trust effective June 11, 2007 and of the Choi Family Exemption Trust effective June 11, 2007.

5. JANE OKIN CHANG, RITA OKYUN LEE and ROBERT ILYONG CHOI are filing this Affidavit with the Los Angeles County Recorder to establish their succession as co-

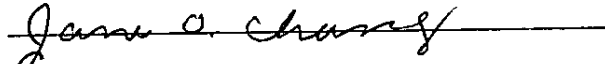
JANE OKIN CHANG, Co-Trustee



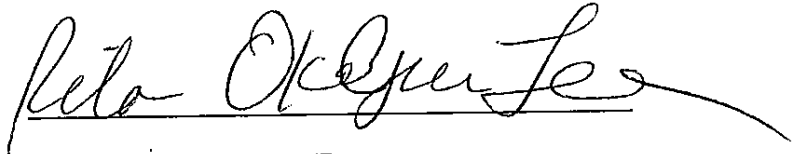
RITA OKYUN LEE, Co-Trustee

ROBERT ILYONG CHOI, Co-Trustee

**THE CHOI FAMILY EXEMPTION TRUST, effective June 11,
2007**



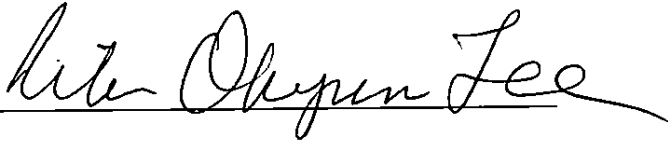
JANE OKIN CHANG, Co-Trustee



RITA OKYUN LEE, Co-Trustee

ROBERT ILYONG CHOI, Co-Trustee

JANE OKIN CHANG, Co-Trustee

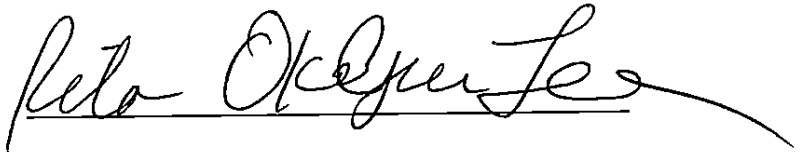


RITA OKYUN LEE, Co-Trustee

ROBERT ILYONG CHOI, Co-Trustee

**THE CHOI FAMILY EXEMPTION TRUST, effective June 11,
2007**

JANE OKIN CHANG, Co-Trustee



RITA OKYUN LEE, Co-Trustee

ROBERT ILYONG CHOI, Co-Trustee

JANE OKIN CHANG, Co-Trustee




RITA OKYUN LEE, Co-Trustee




ROBERT ILYONG CHOI, Co-Trustee

**THE CHOI FAMILY EXEMPTION TRUST, effective June 11,
2007**

JANE OKIN CHANG, Co-Trustee



RITA OKYUN LEE, Co-Trustee



ROBERT ILYONG CHOI, Co-Trustee

ACKNOWLEDGMENT BY NOTARY PUBLIC

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 California)
County of Los Angeles)

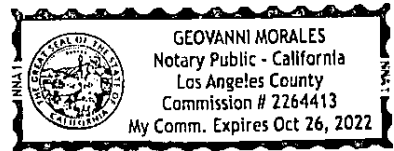
On September 10, 2020, before me, Giovanni Morales, a Notary Public, personally appeared Jane Okin Chang, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies); and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

[Handwritten Signature]



(SEAL)

JURAT

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.

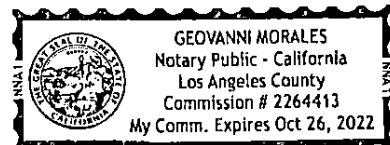
State of California)
County of Los Angeles)

Subscribed and sworn to (or affirmed) before me on this September 10, 2020, by Jane Okin Chang, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature

[Handwritten Signature]

(SEAL)



ACKNOWLEDGMENT BY NOTARY PUBLIC

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.

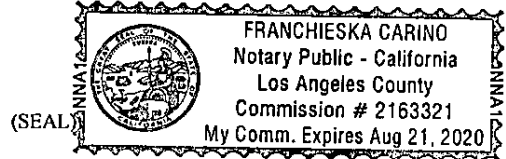
State of California)
County of Los Angeles)

On 2/29, 2020, before me, Francheska Carino, a Notary Public, personally appeared Rita Okyun Lee, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature [Handwritten Signature]
JURAT



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 California)
County of Los Angeles)

Subscribed and sworn to (or affirmed) before me on this 2/29, 2020 by Rita Okyun Lee, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature [Handwritten Signature]
(SEAL)



ACKNOWLEDGMENT BY NOTARY PUBLIC

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 California)
County of Los Angeles)

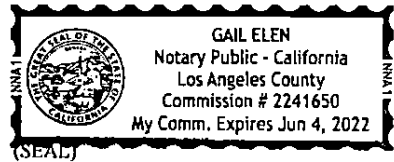
On September 11, 2020, before me, GAIL ELEN, NOTARY PUBLIC, a Notary Public, personally appeared ROBERT ILYONG CHO I, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she~~/~~they~~ executed the same in his/~~her~~/~~their~~ authorized capacity(ies), and that by his/~~her~~/~~their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Gail Elen



JURAT

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 California)
County of Los Angeles)

Subscribed and sworn to (or affirmed) before me on this September 11, 2020, by ROBERT ILYONG CHO I, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature

Gail Elen

(SEAL)

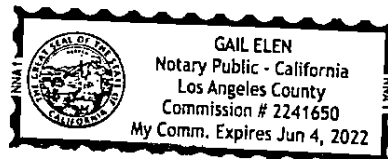


EXHIBIT "A"

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC HEALTH

3052019253279 CERTIFICATE OF DEATH 3201919056576
1. NAME OF DECEASED - FIRST (Given) MOON
2. MIDDLE ZA
3. LAST (Family) CHOI
4. DATE OF BIRTH 06/17/1933
5. AGE Yrs. 86
6. MONTHS 0
7. DAYS 0
8. HOURS 0
9. MINUTES 0
10. SECS 0
11. SEX F
9. BIRTH STATE/FOREIGN COUNTRY CHINA
10. SOCIAL SECURITY NUMBER 489-48-5133
11. EVER IN U.S. ARMED FORCES? YES NO [X] UNK
12. MARITAL STATUS/GRDP (at Time of Death) WIDOWED
13. DATE OF DEATH 12/15/2019
14. HOUR 0458
13. EDUCATION - Highest Level/Degree (see worksheet on back) MASTER'S
14.15 WAS DECEASED HISPANIC/LATINO/SPANISH? YES NO [X] UNK
15. DECEASED'S RACE - Up to 3 races may be listed (see worksheet on back) ASIAN
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED. OWNER
18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) IMPORT-EXPORT
19. YEARS IN OCCUPATION 30
20. DECEASED'S RESIDENCE (Street and number, or location) 5510 JED SMITH RD
21. CITY HIDDEN HILLS
22. COUNTY/PROVINCE LOS ANGELES
23. ZIP CODE 91302
24. YEARS IN COUNTY 48
25. STATE/FOREIGN COUNTRY CA
26. INFORMANT'S NAME, RELATIONSHIP RITA LEE, DAUGHTER
27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 26545 MACMILLAN RANCH RD, CANYON COUNTRY, CA 91387
28. NAME OF SURVIVING SPOUSE/GRDP - FIRST
29. MIDDLE
30. LAST (BIRTH NAME)
31. NAME OF FATHER/PARENT - FIRST DONG
32. MIDDLE
33. LAST OK
34. BIRTH STATE S KOREA
35. NAME OF MOTHER/PARENT - FIRST JAE
36. MIDDLE CHUN
37. LAST (BIRTH NAME) LEE
38. BIRTH STATE S KOREA
39. DISPOSITION DATE 12/23/2019
40. PLACE OF FINAL DISPOSITION PIERCE BROTHERS VALLEY OAKS MEMORIAL PARK
41. TYPE OF DISPOSITION BU
42. SIGNATURE OF EMBALMER KAREN SCHROEDER
43. LICENSE NUMBER EMB8406
44. NAME OF FUNERAL ESTABLISHMENT VALLEY OAKS GRIFFIN MORTUARY
45. LICENSE NUMBER FD1344
46. SIGNATURE OF LOCAL REGISTRAR MUNTU DAVIS, M.D.
47. DATE 12/18/2019
101. PLACE OF DEATH WEST VALLEY POST ACUTE
102. IF HOSPITAL, SPECIFY ONE
103. IF OTHER THAN HOSPITAL, SPECIFY ONE
104. COUNTY LOS ANGELES
105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 7057 SHOUP AVE
106. CITY WEST HILLS
107. CAUSE OF DEATH
108. DEPTH REPOSED (COCYR OR OTHER)
109. IMMEDIATE CAUSE (Final disease or condition resulting in death) ALZHEIMER'S DISEASE
110. UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death) LAST
111. USED IN DETERMINING CAUSE?
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 NONE
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) NO
114. CERTIFY THIS TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.
115. SIGNATURE AND TITLE OF CERTIFIER CALEB WARREN HIRSCH M.D.
116. LICENSE NUMBER G62063
117. DATE 12/17/2019
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE CALEB WARREN HIRSCH M.D.
119. CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.
120. INJURED AT WORK?
121. INJURY DATE
122. HOUR (24 Hours)
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)
125. LOCATION OF INJURY (Street and number, or location, and city, and zip)
126. SIGNATURE OF CORONER / DEPUTY CORONER
127. DATE
128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER
STATE REGISTRAR A B C D E FAX AUTH.# CENSUS TRACT

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.



Health Officer and Registrar DO 18 DATE ISSUED DEC 20 2019

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the Registrar.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

