

CERTIFICATE OF TRUST

UPON OATH, IT IS HEREBY CERTIFIED that:

Name:

Social Security Number:

Name:

Social Security Number:

is/are entitled to the use and occupancy as to an equitable life estate in the real property under the terms of the:

Name of Trust:

Dated:

and therefore hold sufficient title to claim a Homestead Exemption in compliance with Section 196.041(2), Florida Statutes; and Rule 12D-7.011, Florida Administrative Code, on the property set forth below:

Property Identification #:

Property Address:

City:

Zip:

SIGNATURE OF TRUSTEE

PRINTED NAME OF TRUSTEE

State of
County of

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ day of _____, 20____, by _____.

NOTARY PUBLIC
Commission No.
My Commission Expires:

____ Personally Known ____ OR Produced Identification ____
Type of Identification Produced _____