AFFIDAVIT OF INDEPENDENT ADMINISTRATION ACCEPTANCE FOR VALUE OF FULL FAITH AND CREDIT IN AN ENTITY

State of CALIFORNIA	1
County of LOS ANGELES	1

I, Bowser: Tammie-LaRae of legal age and sound mind, hereby make this Affidavit of Independent Administration to attest to the independent administration of the estate of TAMMIE LARAE BOWSER SS #8608, Birth Certificate Bond # 579312 Filed June 7th 1965.

I solemnly declare and state that:

I am the duly appointed and qualified Administrator/Executrix of the estate of the above-named entity.

I have taken an oath and assumed my responsibilities as the Administrator/Executrix of the estate, and I am fully authorized to administer and manage all obligations, assets, debts, and affairs related to the estate including but not limited to the ability to sell assets, enter into contracts, distribute assets and accepting all values assigned to Birth Certificate Bond #579312.

The estate in question is eligible for independent administration. There are no known legal disputes, contests, or claims against the estate that would require supervised administration.

I certify that I will act in the best interests of the Beneficial Owner of the estate. I will exercise due diligence and prudence in the management and distribution of assets and ensure that the estate's affairs are handled efficiently and with utmost transparency.

I understand that I have the responsibility to maintain accurate records and accounts of all transactions and activities related to the estate administration. These records will be available for inspection by the beneficiaries, beneficial owner and other authorized parties.

I acknowledge that, as the Administrator/Executrix, I shall be indemnified and held harmless from any claims, losses, or damages incurred in carrying out your duties, except in cases of gross negligence or willful misconduct.

I acknowledge that, as the Administrator/Executrix, I may be held personally liable for any negligence, misconduct, or breach of my fiduciary duties in the administration of the estate. I accept these obligations and affirm that I will act in accordance with the highest standards of professionalism and ethics.

In Witness Whereof; I, said Affiant (Administrator/Executrix) declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Executed and set her hand and seal on May 22nd 2024.

Administrator/Executrix

Affiant Sur-name Bowser: Given name: Tammie-LaRae

Address: c/o 704 Fairview Avenue

South Pasadena, California, <91030-9999> Exempt Non-domestic,

without the UNITED STATES



CERTICATE OF ACKNOWLEDGEMENT

I declare that Affiant (Sur-name) Bowser, (Given name) Tammie LaRae, has sworn under oath and affirm that the above statements are true and correct, and who appears to be of sound mind and under no duress or undue pressure and / or influence, is personally known to me (or has proven to me on the basis of convincing evidence) in her stated capacity to be the Affiant (Registered Owner) that appeared before me and has signed or acknowledged this "Affidavit of Independent Administration" in my presence, as a voluntary act and deed for the purposes stated therein.

CERTIFICATE OF ACKNOWLEDGEMENT

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			A notary public or other officer completing the certificate verifies only the identity of the individual certificate verifies only the identity of the individual certificate verifies to which this certificate who signed the document to which this certificate verifies and not the truthfulness, accuracy, or whether, and not the truthfulness.
State of CALIFORNIA)		certificate vertile document to with certificate vertile document to with tulness, accuracy,
)	(9)	I who sign and not the
County of LOS ANGELES)		is attached, and to validity of that document.

On May 22nd 2024 before me, Bowser: Tammie-LaRae the Beneficial Owner, personally appeared (Sur-name) Bowser, (Given name) Tammie LaRae who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to within this 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 tinder PENALTY OF PERJURY under die laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

y. Hoss

(Seal)

YOUSEF HOSSEINI COMM. # 2392231 NOTARY PUBLIC - CALIFORNIA LOS ANGELES COUNTY MY COMM. EXP. FEB. 10, 2026

My Commission Expires Feb. 10, 2026

ATTESTATION OF WITNESSES

We the undersigned, who is of age of majority, sound mind and mental capacity do hereby declare and affirm that we personally know the affiant to be the person named in this instrument as Sur-name: Bowser, Given name: Tammie-LaRae to be the maker of this document. We affirm that the affiant is to be who she claims to be and that all rights, titles, and interest under the record being received is payable to the affiant as the lawful owner of record. We have witnessed the affiant sign, seal, and deliver this document in our presence on this day and we have placed our signatures on this document in the presence of the affiant and each other as witnesses to declare the same to be true and correct to the best of our knowledge and belief.

Sur-name: Deshield,

Given Name: Dominique-Leontyne

x Deshield Dominique Leantyne

PRINT NAME

X: Deslied favere Oshie Sur-name: Deshield,

Given Name: Lavonne-Ashley

X: Deshoeld Lawonne Ashley



