AFFIDAVIT OF IDENTITY

State of CALIFORNIA	}
	}ss
County of LOS ANGELES	}

Before me. the undersigned notary, Yousef Hosseini, on this 30th day of December, 2023, personally appeared Sur-name: Bowser. Given name: Tammie-LaRae known to be competent and of lawful age, who was first duly sworn by me, on oath, deposes and states the following facts:

- 1. I (Sur-name) Bowser, (Given name) Tammie-LaRae affirm that I was born alive June third, nineteen sixty-five in the country of Illinois.
- 2. I (Sur-name) Bowser, (Given name) Tammie-LaRae declare that I am not a U.S. Citizen and that I am a free national of the several states of the Union.
- 3. I (Sur-name) Bowser, (Given name) Tammie-LaRae declare that I am nonresident who does not reside in the District of Columbia
- 4. I (Sur-name) Bowser, (Given name) Tammie-LaRae declare that I am not a TAXPAYER
- 5. I (Sur-name) Bowser, (Given name) Tammie-LaRae affirm that a person's middle name(s) or suffix is not considered part of the legal name by Social Security Administration
- 6. I (Sur-name) Bowser, (Given name) Tammie-LaRae declare that the U.S. Person (TAMMIE LARAE BOWSER SSN: 8608) created June seventh, nineteen sixty-five is my private personal property and is a registered agency with the State of Illinois File # 112-65 650183.
- 7. I (Sur-name) Bowser, (Given name) Tammie-LaRae declare that the U.S. Person (TAMMIE LARAE BOWSER SSN: 8608) is a U.S. Citizen
- 8. I (Sur-name) Bowser, (Given name) Tammie-LaRae declare that the U.S. Person (TAMMIE LARAE BOWSER SSN: 8608) is a RESIDENT located at 704 FAIRVIEW AVENUE, SOUTH PASADENA, CA 91030
- 9. I (Sur-name) Bowser, (Given name) Tammie-LaRae declare that the U.S. Person (TAMMIE LARAE BOWSER SSN: 8608) is a TAXPAYER
- 10. I (Sur-name) Bowser, (Given name) Tammie-LaRae declare that the U.S. Person (TAMMIE LARAE BOWSER SSN: 8608) owes all obligations to me
- 11. I (Sur-name) Bowser, (Given name) Tammie-LaRae affirm that I am the creditor over the U.S. TAX PAYER (TAMMIE LARAE BOWSER SSN: 8608) and claim all rights to any interest in property of the principal whether tangible or intangible.

NOTICE OF CLAIM

- WHOEVER UNDER THE TRANSFER, EXCHANGE OR DISPOSITION OF THIS DOCUMENT SHALL BE CHARGED WITH THE DUTIES TO CREDIT THE DATA AND DISCHARGE THIS OBLIGATION UPON RECEIPT
- THIS TRANSFER SHALL VEST ALL RIGHTS, DUTIES, AND RESPONSIBLITIES THAT I HAVE AS THE OWNER OF RECORDS OVER TO THE HOLDER GRANTING YOU THE SAME DUTIES, RIGHTS, AND RESPONSIBLITIES TO PERFORM THE SAME.
- ALL CHARGES, FEES, TAXES, OR ANY UNPAID ACCRUED INTEREST SHALL BE CHARGED TO THE UNITED STATES IN ACCORDANCE WITH USC 18 SECTION 8
- ALL OWNERSHIP RIGHTS OVER ALL ASSETS BEING HELD ARE CLAIMED FOR PROCEEDS PAYABLE BACK TO ME FOR REINBURSEMENT

This Affidavit shall stand as true and correct unless rebutted point by point within 30 days of service of this notice, by going to a notary officer certified by the State to issue oaths. Failure to respond or any form of acquiescence does not remove any liability and will constitute your agreement to be bound by this record.

I, Bowser, Tammie-LaRae, the undersigned, declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. By my own Free Will act and deed and by My hand and seal, I do hereby establish these Facts of Truth on May 30th 2024. Without recourse UCC 1-308

X: ___

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

Address: 704 Fairview Avenue,

South Pasadena, California ZIP Exempt Non-domestic,

without the UNITED STATES

x: Bowsey, Tammie - Lakae
PRINT NAME



NOTARY ATTACHED

Notice: Using a Notary on this document does *not* create an adhesion contract with the state, nor does it alter my status in any manner, but is used only for identification and certification purposes and not for entrance into any foreign jurisdiction. All rights are reserved. Without prejudice.

WHEREFORE: Further affiant saith not

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.

CERTIFICATE OF ACKNOWLEDGEMENT

State of CALIFORNIA

) }s

County of LOS ANGELES

before me. A

(insert name and trile of the officer)

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 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.

(Seal)

WITNESS my hand and official seal.

SIGNATURE OF NOTAR

ALLAN MUNGUIA Notary Public - California Los Angeles County Commission # 2482554

y Comm. Expires Feb 20, 2028

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 Leartune

PRINT NAME

Sur-name: Desnield.

Given Name: Lavonne-Ashley

Lavonne Ach

PRINT NAME



