ALL-PURPOSE ACKNOWLEDGEMENT

State of California. ( )

County of ____________________)

On ______________ before me, _____________________________________________,

Date Name and Title of Officer (i.e., Your Name, Notary Public)

personally appeared __________________________________________________________,

Name(s) of Document Signer(s)

personally known to me (or 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 signatures(s) on the instrument the person(s), or the entity upon behalf of which the
person(s) acted, executed the instrument.

WITNESS my hand and official seal.

_________________________________

Signature of Notary

(Affix seal in the above blank space)