

D2100000000060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/01/21--01029-021 **350.00

21 AUG 11 PM 12:43
TALLAHASSEE, FLORIDA

8/11

D O'KEEFE
AUG 12 2021

W21-41362



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 24, 2021

DARREN BUCK
4970 N CITATION DR. APT. 202
DELRAY BEACH, FL 33445

SUBJECT: DB TRUST
Ref. Number: W21000041362

We have received your document for DB TRUST and your check(s) totaling \$350.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Two or more persons must be listed as a Trustee. It also appears that the complete document was not sent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 021A00006521

*Where is main
document?
8/11/21*

21 AUG 11 PM 12:43
TALLAHASSEE, FLORIDA

2021 JUL 11 AM 11:37

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: db Trust

Enclosed is an original and one (1) copy of the Declaration of Trust and a check for:

FEES:

Declaration of Trust	\$350.00
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OPTIONAL:

Certified Copy	\$ 8.75
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FROM: Darren Buck

Name (Printed or typed)

4970 N Citation Dr. Apt 202

Address

Delray Beach, FL 33445

City, State & Zip

940.597.1498

Daytime Telephone number

**AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE
TO FILE OR QUALIFY**

db TRUST

A Revocable TRUST

In accordance with Section 609.02 of the Florida Statutes, pertaining to
Common Law Declarations of Trust, the undersigned, the Chairman of the
Board of Trustees of db Trust, a

Florida (Name of Trust)
Trust hereby affirms in order to file or qualify
(State)
db Trust in the State of Florida.
(Name of Trust)

1. Two or more persons are named in the Trust.

2. The principal address is 4970 N Citation Dr. Apt 202

Delray Beach, FL 33445

3. The registered agent and street address in the State of Florida is:
4970 N Citation Dr. Apt 202

Darren E. Buck

Delray Beach, FL 33445

4. Acceptance by the registered agent: Having been named as registered
agent to accept service of process for the above named Declaration of Trust
at the place designated in this affidavit, I hereby accept the appointment as
registered agent and agree to act in this capacity.

(Signature of Registered Agent)

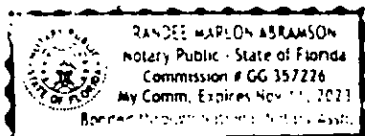
5. I certify that the attached is a true and correct copy of the Declaration of
Trust under which the association proposes to conduct its business in
Florida.

Darren E. Buck
Name:
Chairman of the Board of Trustees

NOTARY

State of Florida
County of Palm Beach

CR2E063(3/00)



Filing Fee: **\$350.00**
Certified Copy: **\$ 8.75 (optional)**

Sworn before me Darren Buck this 18th
day of February, 2021, by
Randee ABRAMSON
Personally Known ✓

DECLARATION OF TRUST

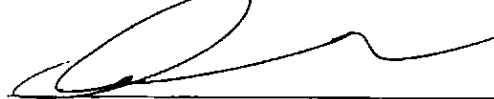
I, **DARREN EDWARD BUCK**, hereby declare that all assets of every kind and description and wheresoever situated which I presently own or hereafter acquire (regardless of the means by which acquired and/or the record title in which held; including, by way of illustration and not limitation, all real property, investments, bank accounts, etc.), other than any Individual Retirement Accounts or other type of plan which is tax deferred under the Internal Revenue Code of 1986, as amended, are transferred to and the same shall be owned by:

THE DB LIVING TRUST,

being a revocable living trust, which exists under a certain Trust Agreement created by me concurrently herewith.

The foregoing declaration and transfer shall apply even though "record" ownership or title, in some instances, may, presently or in the future, be registered in my respective individual name, in which event such record ownership shall hereafter be deemed held in trust even though such trusteeship remains undisclosed. This declaration may be terminated by me by written notice to the Trustee of the above-mentioned trust.

Executed on August 16, 2021, in Palm Beach County, Florida.




DARREN EDWARD BUCK

STATE OF FLORIDA

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me, by means of ☒ physical presence or ☐ online notarization, this 16 day of August, 2021, by DARREN EDWARD BUCK.



NOTARY PUBLIC (State of Florida)

Personally Known ☐ OR Produced Identification ☒

Type of Identification Produced: Drivers License



21 AUG 11 PM 12:43
PALM BEACH, FLORIDA

CERTIFICATION OF TRUST

TO: ALL FINANCIAL INSTITUTIONS, MUTUAL FUND ADMINISTRATORS, TITLE INSURERS, TRANSFER AGENTS, AND OTHER PERSONS AND INSTITUTIONS

The undersigned desires to confirm the establishment of a revocable living trust named THE DB LIVING TRUST (hereinafter referred to as the "Trust"). The following provisions are found in said Trust and may be relied upon as a full statement of the matters covered by such provisions by anyone dealing with the original Trustee or his successors.

CREATION OF TRUST

The Trust was created concurrently herewith by a Trust Agreement executed by the undersigned as Trustor and Trustee, for the benefit of the undersigned during his lifetime and thereafter for the benefit of other successor beneficiaries in interest.

NAME OF TRUST

The name of the Trust is THE DB LIVING TRUST. Any assets held in the name of the Trust should be titled in substantially the following manner: DARREN EDWARD BUCK, as Trustee of THE DB LIVING TRUST, U/A dated 8/6, 2021.

TRUSTEE

The currently acting Trustee of the Trust is DARREN EDWARD BUCK. If he should cease to act as the Trustee for any reason, he shall be succeeded by MICHAEL DAUSEL as the successor Trustee. If said successor Trustee fails to qualify or ceases to act, BEAU BUCK shall act as alternate successor Trustee.

REVOCABILITY OF TRUST

The Trust is revocable. The person holding the power to revoke or amend the Trust is DARREN EDWARD BUCK.

TAXPAYER IDENTIFICATION NUMBER

The Trust uses the Social Security number of the Trustor as its Taxpayer Identification Number. No separate tax identification number is required while this Trust is revocable and the Trustor is acting as a Trustee.

ADDRESS OF THE TRUST

The Trust uses the address of the Trustor/Trustee as its location. This address is currently 4970 N Citation Dr., Apt 202, Delray Beach, Florida 33445.

TRUSTEE AUTHORITY

- (1) Subject to state law, a Trustee may appoint an Attorney-in-Fact ("Power of Attorney") and delegate to such agent the exercise of all or any of the powers conferred upon a Trustee.
- (2) No purchaser from or other person dealing with a Trustee shall be responsible for the application of any purchase money or thing of value paid or delivered to such Trustee, but the receipt by a Trustee shall be a full discharge; and no purchaser or other person dealing with a Trustee and no issuer, or transfer agent, or other agent of any issuer of any securities to which any dealings with a Trustee should relate, shall be under any obligation to ascertain or inquire into the power of such Trustee to purchase, sell, exchange, transfer, mortgage, pledge, lease, distribute or otherwise in any manner dispose of or deal with any security or any other property held by such Trustee or comprised in the trust fund.
- (3) The certification of a Trustee that such person is acting according to the terms of the Trust shall fully protect all persons dealing with such Trustee. Any person may rely upon the certification of any Trustee as to the matters which are not contained in this Certification of Trust, including a further enumeration of the Trustee's powers.

A person who acts in reliance on this Certification of Trust without knowledge that the representations contained in this Certification of Trust are incorrect is not liable to any person for so acting and may assume without inquiry the existence of the facts contained in this Certification. Knowledge of the terms of the Trust may not be inferred solely from the fact that a copy of all or part of the trust instrument is held by the person relying on the certification. A person who in good faith enters into a transaction in reliance on this Certification of Trust may enforce the transaction against the trust property as if the representations contained in this Certification of Trust were correct.

TRUSTEE'S POWERS


The Trustee shall have, in general, the power to do and perform any and all acts and things in relation to the trust fund in the same manner and to the same extent as an individual might or could do with respect to his or her own property including the power to buy, sell, hold, transfer, convey, or exercise any ownership rights in any asset for the Trust by executing any appropriate document, or by an oral demand to buy or sell a security; to maintain, deposit or to withdraw from any bank, brokerage or mutual fund account (including margin accounts), and to sign checks or drafts on any such account; to purchase or exercise rights in any life insurance or annuity contracts; and to borrow and pledge any Trust asset as security. In addition to the above, the Trustee shall have all of the powers enabled by §736.0816 of the Florida Trust Code (as though such powers were set forth herein) and, in addition, the Trustee is specifically authorized and empowered to exercise those powers set forth in Article IV of said Trust.

No specific provision of the Trust limits the general authority of the Trustee granted in the Trust and outlined above. Further, the Trust is not subject to supervision by any court nor is court permission or approval necessary for any act by the Trustee.

ADMINISTRATIVE PROVISIONS

- (1) The Trust shall be administered according to the Florida Trust Code (Title XLII, Chapter 736 of the Florida Statutes), except as shall be specifically modified therein.
- (2) The Trust has not been revoked, modified, or amended in any manner that would cause the representations contained in this Certification of Trust to be incorrect.
- (3) This Certification of Trust is a true and accurate statement of the matters referred to herein concerning the Trust.
- (4) This Certification of Trust has been signed by the currently acting sole Trustee of the Trust.
- (5) Reproductions of this executed original (with reproduced signatures) shall be deemed to be original counterparts of this Certification of Trust and any person who is in possession of a photocopy of this executed Certification may, in good faith, rely upon the information it contains and shall not be liable to the Trustor, any Trustee or beneficiary for reliance upon the information herein contained.
- (6) No person shall have received notice of any event upon which the use of this Certification of Trust depends unless said notice is in writing and until the notice is delivered to said person.

IN WITNESS WHEREOF, the undersigned declares under penalty of perjury that the foregoing is true and correct and that he has executed this Certification of Trust on Aug 6, 2021, in Palm Beach County, Florida.


DARREN EDWARD BUCK,
Trustor-Trustee

FILED
21 AUG 11 PM 12:43
CLERK OF DISTRICT COURT
PALM BEACH COUNTY, FLORIDA

On the date last above written, DARREN EDWARD BUCK declared to us, the undersigned, that the foregoing instrument was his and requested us to act as witnesses to it. That to the best of our knowledge, DARREN EDWARD BUCK was of legal age, of sound mind, and under no constraint or undue influence. DARREN EDWARD BUCK thereupon signed this instrument in our presence, all of us being present at the same time. We now, at his request, in his presence and in the presence of each other, subscribe our names as witnesses.

Sheila Biniacki

[signature - please print name under this line]

Sheila Biniacki

210 NE 6th Ave

[street address]

Delray Beach FL 33483

[city, state]

S.C. Algoner

[signature - please print name under this line]

S.C. Algoner

210 NE 6th Ave

[street address]

Delray Beach FL 33483

[city, state]

AFFIDAVIT

STATE OF FLORIDA, COUNTY OF PALM BEACH, ss.

IN WITNESS WHEREOF, I, DARREN EDWARD BUCK, the Trustor-Trustee, have signed my name to this instrument on this 6th day of August, 2021, and being duly sworn, do hereby declare to the undersigned authority and the undersigned witnesses that I signed and executed this instrument, that I signed it willingly (or willingly directed another to sign for me), that I executed it as my free and voluntary act for the purposes therein expressed, and that I am of legal age, of sound mind, and under no constraint or undue influence.

[Signature]

DARREN EDWARD BUCK

FILED
21 AUG 11 PM 12:43
TALLAHASSEE, FLORIDA

We, Susan Agnew and Sheila Biniecki, the witnesses, sign our names to this instrument, and, being duly sworn, do hereby declare to the undersigned authority that DARREN EDWARD BUCK, the Trustor-Trustee, signed and executed this instrument and that DARREN EDWARD BUCK signed it willingly (or willingly directed another to sign for him), and that each of us, in the presence and hearing of DARREN EDWARD BUCK, hereby signs this instrument as witness to his signing, and that to the best of our knowledge he is of legal age, of sound mind, and under no constraint or undue influence.

Sheila Biniecki
[signature - please print name under this line]
Sheila Biniecki
[Signature]
[signature - please print name under this line]
S.C. Agnew

The foregoing instrument was acknowledged, subscribed and sworn to before me, by means of ☒ physical presence or ☐ online notarization, by DARREN EDWARD BUCK, who is personally known to me or who has produced Drives License as photo identification, and sworn to and subscribed before me, by means of ☒ physical presence or ☐ online notarization, by the witnesses, Susan Agnew, who is personally known to me or who has produced _____ as photo identification, and Sheila Biniecki, who is personally known to me or who has produced _____ as photo identification, on this 6th day of August, 2021.



[Signature]
NOTARY PUBLIC - STATE OF FLORIDA

FILED
21 AUG 11 PM 12:43
TALLAHASSEE, FLORIDA

db Trust
4970 N Citation Drive Apt. 202
Delray Beach, FL 33445

**AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE TO FILE OR QUALIFY
db TRUST, A REVOCABLE TRUST**

TRUSTEES

Primary: MICHAEL DAUSEL

175 Grandview Ave,

Valparaiso, FL 32580

850.374.4391

Secondary: BEAU BUCK

559 NE 46th Str, Apt 110

Boca Raton, FL 33431

850.572.8662

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21 AUG 11 PM 12:43
TALLAHASSEE, FLORIDA