

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

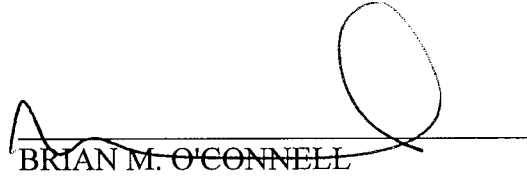
**NOTICE OF INTENT PURSUANT TO**  
**FLA. R. CIV. P. 1.351**

YOU ARE NOTIFIED that, after fifteen (15) days from the date of service, and if no objection is received from any party, the undersigned will issue the attached Subpoenas directed to:

AMERICAN GENERAL LIFE INSURANCE COMPANY  
CRUMP LIFE INSURANCE SERVICES, INC.  
FREUNDT & ASSOCIATES INSURANCE SERVICES, INC.  
HARTFORD LIFE & ANNUITY INSURANCE COMPANY  
RELIASTAR LIFE INSURANCE COMPANY  
JOHN HANCOCK LIFE INSURANCE COMPANY  
LINCOLN BENEFIT LIFE COMPANY  
LINCOLN NATIONAL LIFE INSURANCE COMPANY  
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY  
MUTUAL OF OHAMA INSURANCE COMPANY  
PACIFIC LIFE INSURANCE COMPANY  
PHOENIX LIFE INSURANCE COMPANY  
SUMMIT ALLIANCE LECERAGED SOLUTIONS, LLC (f/k/a or a/k/a Summit Alliance  
Financial, LLP)  
DELAWARE LIFE INSURANCE COMPANY (f/k/a Sun Life Assurance Company of Canada  
US)  
TRANSAMERICA LIFE INSURANCE COMPANY  
PENN MUTUAL LIFE INSURANCE COMPANY  
LINCOLN FINANCIAL GROUP, INC.

to produce the items listed at the time and place specified in the attached subpoenas.

I HEREBY CERTIFY that a true and correct of the foregoing was sent by e-mail service or U.S. Postal Service on the 10 day of June, 2015 to the parties on the attached Service List.



BRIAN M. O'CONNELL  
Florida Bar No: 308471  
ASHLEY N. CRISPIN  
Florida Bar No: 037495  
MELISSA D. LAZARCHICK, ESQ.  
Florida Bar No. 043696  
Ciklin Lubitz & O'Connell  
515 N. Flagler Dr., 20th Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900  
Facsimile: 561-833-4209  
primary e-mail: [service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
secondary e-mail: [slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**SERVICE LIST**

<p>Alan B. Rose, Esq. Page, Mrachek, Fitzgerald &amp; Rose, PA. 505 S. Flagler Dr., Suite 600 West Palm Beach, FL 33401 (561) 355-6991 <a href="mailto:arose@mrachek-law.com">arose@mrachek-law.com</a> <a href="mailto:mchandler@mrachek-law.com">mchandler@mrachek-law.com</a> Attorney for Ted S. Bernstein</p>	<p>John P. Morrissey, Esq. 330 Clematis St., Suite 213 West Palm Beach, FL 33401 <a href="mailto:john@jmorrisseylaw.com">john@jmorrisseylaw.com</a> Attorney for Molly Simon et al</p>	<p>Donald R. Tescher, Esq. Robert L. Spallina, Esq. 925 S. Federal Highway, Suite 500 Boca Raton, FL 33432 <a href="mailto:Dtescher@tescherlaw.com">Dtescher@tescherlaw.com</a> <a href="mailto:ddustin@tescherlaw.com">ddustin@tescherlaw.com</a> <a href="mailto:rspallina@tescherspallina.com">rspallina@tescherspallina.com</a> <a href="mailto:kmoran@tescherspallina.com">kmoran@tescherspallina.com</a></p>
<p>Peter Feaman, Esq. Peter M. Feaman, P.A. 3695 Boynton Beach Blvd., Suite 9 Boynton Beach, FL 33436 <a href="mailto:pfeaman@feamanlaw.com">pfeaman@feamanlaw.com</a></p>	<p>Shendell &amp; Pollock, P.L. 2700 N. Military Trail, suite 150 Boca Raton, FL 33431 241-2323 Fax: 241-2330 Gary R. Shendell, Esq. <a href="mailto:gary@shendellpollock.com">gary@shendellpollock.com</a> <a href="mailto:estella@shendellpollock.com">estella@shendellpollock.com</a> <a href="mailto:grs@shendellpollock.com">grs@shendellpollock.com</a> Kenneth S. Pollock, Esq. <a href="mailto:ken@shendellpollock.com">ken@shendellpollock.com</a> <a href="mailto:britt@shendellpollock.com">britt@shendellpollock.com</a> <a href="mailto:grs@shendellpollock.com">grs@shendellpollock.com</a>  Attorney for Tescher and Spallina</p>	<p>Max Friedstein 2142 Churchill Lane Highland Park, IL 60035 Beneficiary</p>
<p>Eliot Bernstein and Joshua, Jacob and Daniel Bernstein, Minors c/o Eliot and Candice Bernstein, Parents and Natural Guardians 2753 N.W. 34<sup>th</sup> St. Boca Raton, FL 33434 <a href="mailto:iviewit@iviewit.tv">iviewit@iviewit.tv</a></p>	<p>Pamela Beth Simon 950 N. Michigan Ave., Apt. 2603 Chicago, IL 60611 <a href="mailto:psimon@stpcorp.com">psimon@stpcorp.com</a></p>	<p>Lisa Friedstein and Carley Friedstein, Minor c/o Jeffrey and Lisa Friedstein Parent and Natural Guardian 2142 Churchill Lane Highland Park, IL 60035 <a href="mailto:Lisa@friedsteins.com">Lisa@friedsteins.com</a> <a href="mailto:Lisa.friedstein@gmail.com">Lisa.friedstein@gmail.com</a> Beneficiary</p>
<p>Jill Iantoni and Julia Iantoni, a Minor c/o Guy and Jill Iantoni, her Parents &amp; Natural Guardians 2101 Magnolia Lane Highland Park, IL 60035 <a href="mailto:jilliantoni@gmail.com">jilliantoni@gmail.com</a></p>		

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.  
\_\_\_\_\_ /

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
AMERICAN GENERAL LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 10:00 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012  
Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for AMERICAN  
GENERAL LIFE INSURANCE COMPANY, located at \_\_\_\_\_.

As Records Custodian, it is my duty to maintain the business records of the regular business of the above-  
referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records  
Custodian of AMERICAN GENERAL LIFE INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were  
printed out contained within computer files, hard drives, computer disks, if any, are being produced  
herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts  
of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of AMERICAN GENERAL LIFE  
INSURANCE COMPANY.

7. All of these records have been regularly maintained by AMERICAN GENERAL LIFE  
INSURANCE COMPANY and have remained within the custody of AMERICAN GENERAL LIFE  
INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

SUBPOENA DUCES TECUM WITHOUT DEPOSITION

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
CRUMP LIFE INSURANCE SERVICES, INC.  
c/o Registered Agent  
CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 10:10 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.



**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for CRUMP LIFE INSURANCE SERVICES, INC., located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of CRUMP LIFE INSURANCE SERVICES, INC. pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of CRUMP LIFE INSURANCE SERVICES, INC..

7. All of these records have been regularly maintained by CRUMP LIFE INSURANCE SERVICES, INC. and have remained within the custody of CRUMP LIFE INSURANCE SERVICES, INC. from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.:  
My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.  
\_\_\_\_\_ /

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
FREUNDT & ASSOCIATES INSURANCE SERVICES, INC.  
c/o Registered Agent  
Paracorp Incorporated  
155 Office Plaza Drive, 1<sup>st</sup> Floor  
Tallahassee, FL 32301

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 10:20 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012  
Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for FREUNDT &  
ASSOCIATES INSURANCE SERVICES, INC., located at \_\_\_\_\_.

As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of FREUNDT & ASSOCIATES INSURANCE SERVICES, INC. pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of FREUNDT & ASSOCIATES INSURANCE SERVICES, INC..

7. All of these records have been regularly maintained by FREUNDT & ASSOCIATES INSURANCE SERVICES, INC. and have remained within the custody of FREUNDT & ASSOCIATES INSURANCE SERVICES, INC. from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.: \_\_\_\_\_  
My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

SUBPOENA DUCES TECUM WITHOUT DEPOSITION

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
HARTFORD LIFE AND ANNUITY INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 10:30 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

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If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for HARTFORD  
LIFE AND ANNUITY INSURANCE COMPANY, located at \_\_\_\_\_.

As Records Custodian, it is my duty to maintain the business records of the regular business of the above-  
referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records  
Custodian of HARTFORD LIFE AND ANNUITY INSURANCE COMPANY pertaining to Simon  
Bernstein.

3. All of the records, including records existing in hard copy, and records which were  
printed out contained within computer files, hard drives, computer disks, if any, are being produced  
herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts  
of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of HARTFORD LIFE AND ANNUITY  
INSURANCE COMPANY.

7. All of these records have been regularly maintained by HARTFORD LIFE AND  
ANNUITY INSURANCE COMPANY and have remained within the custody of HARTFORD LIFE  
AND ANNUITY INSURANCE COMPANY from the time which they were created until the present  
date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

---

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
RELIASTAR LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 10:40 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for RELIASTAR LIFE INSURANCE COMPANY, located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of RELIASTAR LIFE INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of RELIASTAR LIFE INSURANCE COMPANY.

7. All of these records have been regularly maintained by RELIASTAR LIFE INSURANCE COMPANY and have remained within the custody of RELIASTAR LIFE INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

---

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
JOHN HANCOCK LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 10:50 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.



**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

AFFIDAVIT OF AUTHENTICITY

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for JOHN HANCOCK LIFE INSURANCE COMPANY, located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of JOHN HANCOCK LIFE INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of JOHN HANCOCK LIFE INSURANCE COMPANY.

7. All of these records have been regularly maintained by JOHN HANCOCK LIFE INSURANCE COMPANY and have remained within the custody of JOHN HANCOCK LIFE INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:

Notary Public, State of \_\_\_\_\_

My Commission No.:

My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

SUBPOENA DUCES TECUM WITHOUT DEPOSITION

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
LINCOLN BENEFIT LIFE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 11:00 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for LINCOLN BENEFIT LIFE COMPANY, located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of LINCOLN BENEFIT LIFE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of LINCOLN BENEFIT LIFE COMPANY.

7. All of these records have been regularly maintained by LINCOLN BENEFIT LIFE COMPANY and have remained within the custody of LINCOLN BENEFIT LIFE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

\_\_\_\_\_  
The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
Print Name:

Notary Public, State of \_\_\_\_\_

My Commission No.:

My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

---

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
LINCOLN NATIONAL LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 11:10 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.



**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for LINCOLN NATIONAL LIFE INSURANCE COMPANY, located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of LINCOLN NATIONAL LIFE INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of LINCOLN NATIONAL LIFE INSURANCE COMPANY.

7. All of these records have been regularly maintained by LINCOLN NATIONAL LIFE INSURANCE COMPANY and have remained within the custody of LINCOLN NATIONAL LIFE INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
Print Name:

Notary Public, State of \_\_\_\_\_

My Commission No.:

My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

---

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 11:20 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012  
Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for  
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY, located at  
\_\_\_\_\_. As Records Custodian, it is my duty to maintain the business  
records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records  
Custodian of MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY pertaining to Simon  
Bernstein.

3. All of the records, including records existing in hard copy, and records which were  
printed out contained within computer files, hard drives, computer disks, if any, are being produced  
herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts  
of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of MASSACHUSETTS MUTUAL  
LIFE INSURANCE COMPANY.

7. All of these records have been regularly maintained by MASSACHUSETTS MUTUAL  
LIFE INSURANCE COMPANY and have remained within the custody of MASSACHUSETTS  
MUTUAL LIFE INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

\_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
Print Name:

Notary Public, State of \_\_\_\_\_

My Commission No.:

My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
MUTUAL OF OMAHA INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 11:30 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.



**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for MUTUAL OF OMAHA INSURANCE COMPANY, located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of MUTUAL OF OMAHA INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of MUTUAL OF OMAHA INSURANCE COMPANY.

7. All of these records have been regularly maintained by MUTUAL OF OMAHA INSURANCE COMPANY and have remained within the custody of MUTUAL OF OMAHA INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

\_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
Print Name:

Notary Public, State of \_\_\_\_\_

My Commission No.:

My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

SUBPOENA DUCES TECUM WITHOUT DEPOSITION

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
PACIFIC LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 11:40 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for PACIFIC LIFE INSURANCE COMPANY, located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of PACIFIC LIFE INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of PACIFIC LIFE INSURANCE COMPANY.

7. All of these records have been regularly maintained by PACIFIC LIFE INSURANCE COMPANY and have remained within the custody of PACIFIC LIFE INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.: \_\_\_\_\_  
My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

SUBPOENA DUCES TECUM WITHOUT DEPOSITION

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
PHOENIX LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
c/o CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401**, on **July 30, 2015, at 11:50 AM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.



**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for PHOENIX LIFE  
INSURANCE COMPANY, located at \_\_\_\_\_. As Records Custodian,  
it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records  
Custodian of PHOENIX LIFE INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were  
printed out contained within computer files, hard drives, computer disks, if any, are being produced  
herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts  
of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of PHOENIX LIFE INSURANCE  
COMPANY.

7. All of these records have been regularly maintained by PHOENIX LIFE INSURANCE  
COMPANY and have remained within the custody of PHOENIX LIFE INSURANCE COMPANY from  
the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:

Notary Public, State of \_\_\_\_\_

My Commission No.:

My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

---

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC (F/K/A OR A/K/A SUMMIT  
ALLIANCE FINANCIAL LLP)  
c/o Registered Agent  
CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ &  
O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on  
July 30, 2015, at 12:00 PM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or  
control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007  
through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income  
paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012  
Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to  
surrender the original items. You may comply with this Subpoena by providing legible copies of  
the items to be produced to the attorney whose name appears on this Subpoena on or before the  
scheduled date of production. You may condition the preparation of copies upon the payment in

advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC (F/K/A OR A/K/A SUMMIT ALLIANCE FINANCIAL LLP), located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC (F/K/A OR A/K/A SUMMIT ALLIANCE FINANCIAL LLP) pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC (F/K/A OR A/K/A SUMMIT ALLIANCE FINANCIAL LLP).

7. All of these records have been regularly maintained by SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC (F/K/A OR A/K/A SUMMIT ALLIANCE FINANCIAL LLP) and have remained within the custody of SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC (F/K/A OR A/K/A SUMMIT ALLIANCE FINANCIAL LLP) from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

---

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

---

Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.:  
My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

---

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
DELAWARE LIFE INSURANCE COMPANY (F/K/A SUN LIFE ASSURANCE  
COMPANY OF CANADA US)  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines Street  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ &  
O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on  
July 30, 2015, at 12:10 PM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or  
control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007  
through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income  
paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 -- Date of death 9/12/2012  
Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to  
surrender the original items. You may comply with this Subpoena by providing legible copies of  
the items to be produced to the attorney whose name appears on this Subpoena on or before the  
scheduled date of production. You may condition the preparation of copies upon the payment in  
advance of the reasonable cost of such preparation.



**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for DELAWARE LIFE INSURANCE COMPANY (F/K/A SUN LIFE ASSURANCE COMPANY OF CANADA US) , located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of DELAWARE LIFE INSURANCE COMPANY (F/K/A SUN LIFE ASSURANCE COMPANY OF CANADA US) pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of DELAWARE LIFE INSURANCE COMPANY (F/K/A SUN LIFE ASSURANCE COMPANY OF CANADA US) .

7. All of these records have been regularly maintained by DELAWARE LIFE INSURANCE COMPANY (F/K/A SUN LIFE ASSURANCE COMPANY OF CANADA US) and have remained within the custody of DELAWARE LIFE INSURANCE COMPANY (F/K/A SUN LIFE ASSURANCE COMPANY OF CANADA US) from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

\_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
Print Name:

Notary Public, State of \_\_\_\_\_

My Commission No.:

My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

---

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
TRANSAMERICA LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
1200 South Pine Island Road  
Plantation, FL 33324

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 12:20 PM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for  
TRANSAMERICA LIFE INSURANCE COMPANY, located at  
\_\_\_\_\_. As Records Custodian, it is my duty to maintain the business  
records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records  
Custodian of TRANSAMERICA LIFE INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were  
printed out contained within computer files, hard drives, computer disks, if any, are being produced  
herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts  
of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of TRANSAMERICA LIFE  
INSURANCE COMPANY.

7. All of these records have been regularly maintained by TRANSAMERICA LIFE  
INSURANCE COMPANY and have remained within the custody of TRANSAMERICA LIFE  
INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

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The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

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Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
PENN MUTUAL LIFE INSURANCE COMPANY  
c/o Registered Agent  
Chief Financial Officer  
200 E. Gaines St.  
Tallahassee, FL 32399

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 12:30 PM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.



**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for PENN  
MUTUAL LIFE INSURANCE COMPANY, located at \_\_\_\_\_.

As Records Custodian, it is my duty to maintain the business records of the regular business of the above-  
referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records  
Custodian of PENN MUTUAL LIFE INSURANCE COMPANY pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were  
printed out contained within computer files, hard drives, computer disks, if any, are being produced  
herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts  
of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of PENN MUTUAL LIFE  
INSURANCE COMPANY.

7. All of these records have been regularly maintained by PENN MUTUAL LIFE  
INSURANCE COMPANY and have remained within the custody of PENN MUTUAL LIFE  
INSURANCE COMPANY from the time which they were created until the present date.

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

\_\_\_\_\_  
The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
Print Name:

Notary Public, State of \_\_\_\_\_

My Commission No.:

My Commission Expires:

IN THE CIRCUIT COURT IN AND FOR THE 15<sup>TH</sup> JUDICIAL CIRCUIT IN AND FOR  
PALM BEACH COUNTY, FLORIDA

IN RE: ESTATE OF:

PROBATE DIVISION

SIMON L. BERNSTEIN,

FILE NO: 502012CP4391XXXXNB/IJ

Deceased.

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**SUBPOENA DUCES TECUM WITHOUT DEPOSITION**

THE STATE OF FLORIDA:

TO: RECORDS CUSTODIAN  
LINCOLN FINANCIAL GROUP, INC.  
c/o Registered Agent  
Corporation Service Company  
2711 Centerville Rd., Suite 400  
Wilmington, DE 19808

**YOU ARE COMMANDED** to appear at the law offices of **CIKLIN LUBITZ & O'CONNELL, 515 North Flagler Drive, 20<sup>th</sup> Floor, West Palm Beach, Florida, 33401, on July 30, 2015, at 12:40 PM** and to have with you at that time and place the following:

All records pertaining to **SIMON BERNSTEIN**, which are in your care, custody or control including, but not limited to:

- 1. All checks and 1099(s) issued to Simon Bernstein for the years of 2007 through and including 2012;**
- 2. All documents evidencing any renewal commission(s) and/or other income paid to Simon Bernstein for the years 2007 through and including 2012.**

**Social security number: 371-32-5211 – Date of death 9/12/2012**  
**Address: 7020 Lions Head Lane, Boca Raton, FL 33496**

These items will be inspected and may be copied at that time. You will not be required to surrender the original items. You may comply with this Subpoena by providing legible copies of the items to be produced to the attorney whose name appears on this Subpoena on or before the scheduled date of production. You may condition the preparation of copies upon the payment in advance of the reasonable cost of such preparation.

**YOU MAY MAIL OR DELIVER THE COPIES TO THE ATTORNEY WHOSE NAME APPEARS ON THIS SUBPOENA AND THEREBY ELIMINATE YOUR APPEARANCE AT THE TIME AND PLACE SPECIFIED ABOVE.**

You have the right to object to the production pursuant to this Subpoena at any time before production by giving written notice to the attorney whose name appears on this Subpoena.

**THIS WILL NOT BE A DEPOSITION. NO TESTIMONY WILL BE TAKEN.**

If you fail to:

1. Appear as specified; or
2. Furnish the records instead of appearing as provided above; or
3. Object to this subpoena,

you may be in contempt of court. You are subpoenaed to appear by the following attorney, and unless excused from this Subpoena by the undersigned attorney or the court, you shall respond to this subpoena as directed.

If you decide to mail or deliver the copies of requested documents, please review, sign and notarize the Affidavit of Document Authenticity enclosed herein and return it with the copied documents.

I hereby certify that all parties to this proceeding have received Notice of Intent to Issue the foregoing subpoena, and that no timely objection was raised by any party prior to its issuance.

MELISSA D. LAZARCHICK, ESQUIRE  
For the Court

By: \_\_\_\_\_  
MELISSA D. LAZARCHICK  
Florida Bar No.: 043696

CIKLIN LUBITZ & O'CONNELL  
BRIAN M. O'CONNELL, ESQ.  
MELISSA D. LAZARCHICK, ESQ.  
515 North Flagler Drive, 20<sup>th</sup> Floor  
West Palm Beach, FL 33401  
Telephone: 561-832-5900 Facsimile: 561-833-4209  
[service@ciklinlubitz.com](mailto:service@ciklinlubitz.com)  
[slobdell@ciklinlubitz.com](mailto:slobdell@ciklinlubitz.com)

**AFFIDAVIT OF AUTHENTICITY**

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned authority, personally appeared \_\_\_\_\_,  
who by me being first duly sworn, says to the best of his knowledge,

1. I \_\_\_\_\_ (*insert name*) am the Records Custodian for LINCOLN FINANCIAL GROUP, INC., located at \_\_\_\_\_. As Records Custodian, it is my duty to maintain the business records of the regular business of the above-referenced company.

2. I have received the Subpoena *Duces Tecum* Without Deposition served to Records Custodian of LINCOLN FINANCIAL GROUP, INC. pertaining to Simon Bernstein.

3. All of the records, including records existing in hard copy, and records which were printed out contained within computer files, hard drives, computer disks, if any, are being produced herewith and attached to this Affidavit of Authenticity as Composite Exhibit "A".

4. All of these records are original documents, or true and correct photocopies or printouts of the originals.

5. All of these records were created at or near the time indicated on the records.

6. All of the records are as regular business records of LINCOLN FINANCIAL GROUP, INC..

7. All of these records have been regularly maintained by LINCOLN FINANCIAL GROUP, INC. and have remained within the custody of LINCOLN FINANCIAL GROUP, INC. from the time which they were created until the present date.

\_\_\_\_\_ /

8. All of these records are true, correct, complete, and authentic.

FURTHER AFFIANT SAYETH NAUGHT.

Dated the \_\_\_\_ day of \_\_\_\_\_, 2015.

\_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 2015 by \_\_\_\_\_, as \_\_\_\_\_, on behalf of the corporation. she/he is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
Print Name:  
Notary Public, State of \_\_\_\_\_  
My Commission No.: \_\_\_\_\_  
My Commission Expires: