

AFFIDAVIT OF OWNERSHIP

Henry-Tyler: Smith
c/o [REDACTED]
Ellijay, Georgia Republic [REDACTED]
Affiant

RE: Massachusetts Birth Certificate # 0-[REDACTED]5 for HENRY TYLER SMITH, Estate

I, the undersigned affiant, of lawful age and being first duly sworn on my oath, depose and state that I am familiar with the facts recited, and the party named in said Birth Certificate is the same party as one of the owners named in said certificate of title.

Further affiant sayeth not.



Henry-Tyler: Smith, Affiant

STATE OF GEORGIA)
) ss.
COUNTY OF GILMER)

On this _____ day of November, 2018, before me, the undersigned, a Notary Public in and for Gilmer County, personally appeared the above-signed, known to me to be the one whose name is signed on this instrument, and has acknowledged to me that he/she has executed the same.


Notary Public



6/13/2021
My Commission Expires

(seal)

The Commonwealth of Massachusetts

William Francis Galvin
Secretary of the Commonwealth

C-27

C 2068693

Boston, Massachusetts

August 23, 2018

I hereby certify

that at the date of the attestation hereunto annexed,

KARIN A. BARRETT

Registrar of MA
duly Appointed

and that to his/her acts and attestations, as such, full faith and credit are and ought to be given in and out of Court; and further, that his/her signature to the annexed instrument is genuine.

In testimony of which, I have hereunto affixed the

Great Seal of the Commonwealth



on the first date above written

A handwritten signature in red ink, which reads 'William Francis Galvin'. The signature is written in a cursive style.

William Francis Galvin
Secretary of the Commonwealth

CERTIFICATE OF VITAL RECORD

VERIFY PRESENCE OF WATERMARK HOLD TO LIGHT TO VIEW

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS



Commonwealth of Massachusetts
Registry of Vital Records and Statistics
RECORD OF BIRTH

R [REDACTED] 434

REGISTERED NUMBER: [REDACTED]
STATE FILE NUMBER: [REDACTED]

CHILD

NAME: HENRY TYLER SMITH
SEX: MALE PLURALITY: SINGLE
DATE OF BIRTH: OCTOBER 11, 1988 TIME: 01:02 AM
PLACE OF BIRTH: MELROSE, MA

MOTHER/PARENT

NAME: [REDACTED] SMITH
SURNAME AT BIRTH OR ADOPTION: FLOYD
BIRTHPLACE: KINSTON, NC
AGE OR DATE OF BIRTH: MARCH 12, 1962

FATHER/PARENT

NAME: [REDACTED] CARLISLE SMITH
SURNAME AT BIRTH OR ADOPTION: —
BIRTHPLACE: HUNTSVILLE, AL
AGE OR DATE OF BIRTH: JUNE 14, 1961

AT-BIRTH RESIDENCE: MELROSE, MA

DATE OF RECORD: OCTOBER 24, 1988

DATE ISSUED: AUGUST 09, 2018



Karin A. Barrett
Registrar of Vital Records and Statistics

I, the above signed, hereby certify that I am the Registrar of Vital Records and Statistics; that as such I have custody of the records of birth, marriage, and death required by law to be kept in my office; and I do hereby certify that the above is a true copy from said records.

IT IS ILLEGAL TO ALTER OR REPRODUCE THIS DOCUMENT IN ANY MANNER

VOID WITHOUT WATERMARK OR IF ALTERED OR ERASED

ILLEGAL TO ALTER OR REPRODUCE

VOID IF ALTERED OR ERASED

United States of America

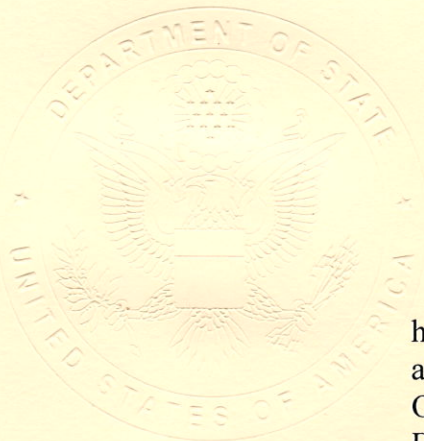


DEPARTMENT OF STATE

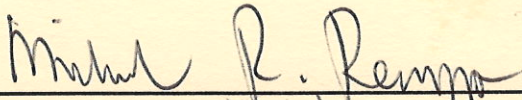
To all to whom these presents shall come, Greetings:

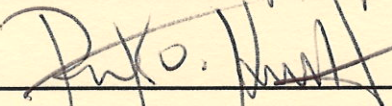
I Certify That the document hereunto annexed is under the Seal of the State(s) of Massachusetts, and that such Seal(s) is/are entitled to full faith and credit.*

**For the contents of the annexed document, the Department assumes no responsibility
This certificate is not valid if it is removed or altered in any way whatsoever*



In testimony whereof, I, Michael R. Pompeo, Secretary of State, have hereunto caused the seal of the Department of State to be affixed and my name subscribed by the Assistant Authentication Officer, of the said Department, at the city of Washington, in the District of Columbia, this twenty-third day of October, 2018.



Secretary of State
By 

Assistant Authentication Officer,
Department of State

Issued pursuant to CHXIV, State of Sept. 15, 1789, 1 Stat. 68-69; 22 USC 2657; 22USC 2651a; 5 USC 301; 28 USC 1733 et. seq.; 8 USC 1443(f); RULE 44 Federal Rules of Civil Procedure.