Filing Fee Paid	t	\$	
	Certs	\$	
Receipt No:		 No:	

DO NOT LEAVE ANY ITEMS BLANK

STATE OF NEW SURROGATE'S	V YORK COURT: COUNTY OF			
In the Matter of in the Estate of	of the Petition for Successor	Letters Testa		PETITION FOR SUCCESSOR LETTERS TESTAMENTARY
a/k/a			Fil	e No
		Deceased.	x	
To the	Surrogate's Court, County of _			
It is re	espectfully alleged:			
	ne petitioner(s) are as follows:			company, its principal office) and interest in this
	ncipal Office:			
			(Street and Number)	
(City, V	illage or Town) Mailing Address:	(State)		(Zip Code)
Citizen of:			(If different from domic	le)
	cipal Office:			
			(Street and Number)	
(City, V	illage or Town) Mailing Address:	(State)		(Zip Code)
Citizen of:			(If different from domic	le)
Interest(s) of Pe	etitioner(s): [Check one] [r Executor(s) named in ecify)	
1.(b)	The proposed Successor Ex [Note: A sole Successor Ex			
1.(c)	employee thereof.	Machine Inc. 15 Ann Inc.		y-draftsperson, a then-affiliated attorney or ployee thereof must comply with SCPA §2307-a]
2.	The will of the above-named	I decedent was	admitted to probate by	the Surrogate's Court of
County on	and	Letters Testan	nentary were issued to	
who on	, [] died	d [] of	ther (specify)	
Sentrate Sections	fiduciary is deceased, please	en: en omsom		

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Name and Relationship		Address and Address		Nature of Fiduciary Status
4. The names and other than those named in p			are named in the w	vill as fiduciaries or beneficiaries,
Name and Relationship		Address and Address		Description of Legacy, Devise or Other Interest, or Nature of Fiduciary Status
[Note: If any such person is may be made on behalf of su		name and post offi	ce address of a pers	son upon whom service of process
	sons other than those	hereinbefore ment	ioned interested in	this proceeding
				e that remains unadministered is
as follows:		andoroignou, are p	reporty of the detail	o man omano anaammotoroa io
Personal Proper	ty \$	Improved real p	property in New Yor	k State \$
Unimproved rea	l property in New York	State \$		
Estimated gross	rents for a period of 1	18 months \$		
				se of action exist on behalf of the
estate, except as follows: [E				
WHEREFORE, peti	tioner(s) pray(s):			
That Successor Lett	ers Testamentary issu	ie to		
in the same manner as origi	nal letters, and that he		rized to complete th ceased.	ne administration of the estate of
Dated:				
1	oner)	2	10:	Petitioner)
(Signature of Petition	oner)		(Signature of	Petitioner)
(Print Name)			(Print N	Name)
			S\$45.000.85	
(Name of Corporate F	Petitioner)	*		
(Signature of Off	ficer)			
(Print Name and Title of	of Officer)			

3. The names and addresses of all persons and parties interested in this proceeding having a right to successor letters testamentary prior or equal to the petitioner(s) are as follows:

COMBINED VERIFICATION, OATH AND DESIGNATION [For use when petitioner is an individual]

STATE OF NEW YORK) COUNTY OF)	ss.:		
The undersigned, the petitioner named 1. VERIFICATION: I have read the	in the foregoing petition, being dule foregoing petition subscribed by r		thoroof and thoroof
same is true of my own knowledge, except as to those matters I believe them to be true.	the matters therein stated to be a	lleged upon information a	nd belief, and as
 OATH OF SUCCESSOR EXECT of the United States and I will well, faithfully and of said decedent according to law. I am not inelige that will come into my hands. 	CUTOR as indicated above: I am over honestly discharge the duties of Figible to receive letters and will duly	iduciary of the goods, cha	ittels and credits
DESIGNATION OF CLERK FO Surrogate's Court of Co	R SERVICE OF PROCESS:	I hereby designate th	e Clerk of the
process issuing from such Court may be made whenever I cannot be found and served within t	in like manner and with like effect	t as if it were served pers	onally upon me,
My domicile is :(Street Address)	(City/Tourn \/ illogo)	(Ctota)	/7: _~ \
(Sileet Address)	(City/Town/Village)	(State)	(Zip)
(Signature of Petitioner)			
(Print Name)			
On		, before me perso	nally appeared
to me known to be the person described in and instrument before me and duly acknowledged the		ment. Such person duly	swore to such
Notary Public Commission Expires: (Affix Notary Stamp or Seal)			
Signature of Attorney:			
Print Name:			
Firm Name:			
Address of Attorney:			

COMBINED CORPORATE VERIFICATION, CONSENT AND DESIGNATION [For use when a petitioner to be appointed is a bank or trust company]

STATE OF NEW YORK COUNTY OF)) ss.:			
I, the undersigned, a		(Title)		of
		(Tide)		
()	Name of Ba	ank or Trust Company)		
a corporation duly qualified to act in a fiduo	ciary capaci	ity without further security, be	eing duly sworn say:	
1. VERIFICATION: I have re same is true of my own knowledge, except to those matters I believe them to be true.	as to the m	going petition subscribed by n natters therein stated to be al		
CONSENT: I consent to a of the decedent described in the foregoing		ppointment as Successor Ex d consent to act as such fidu		and Testament
3. DESIGNATION OF CLER Court of process issuing from such Surrogate's Coupon me, whenever one of the fiduciary's particular diligence is used.	_ County, a urt may be r	and his/her successor in office made, in like manner and with	h like effect as if it were se	n service of any erved personally
(Name of Bank or Trust Company)				
Ву				
(Signature)		(Principa	al Office Street Address)	
(Print Name and Title)	 :	(City/Town/Village)	(State)	(Zip)
On .		before me personally appea	red	
to me known, who duly swore to the forego	oina instrun	nent and who did say that he	/she resides at	of
executed such instrument; and that he/she	, th signed his/	ne corporation/national bank her name thereto by order of	the Board of Directors of	d in and which the corporation.
Notary Public Commission Expires: (Affix Notary Stamp or Seal)				
Signature of Attorney:				
Print Name:				
Firm Name:				
Address of Attorney:	A4002001110000000000000000			

STATE OF NEW YORK SURROGATE'S COUR	T: COUNTY OF	
In the Matter of the Peti in the Estate of	tion for Successor Letters Testamentary	
		RENUNCIATION OF SUCCESSOR LETTERS TESTAMENTARY AND WAIVER OF PROCESS (INDIVIDUAL)
a/k/a		File No
	Deceased.	
The undersign	ned,	, a persor y appears in this proceeding in the Surrogate's Court of
	e as alternate executor, hereby personall County and	y appears in this proceeding in the Surrogate's Court of
	all rights to Successor Letters Testamenta	
	ssuance and service of citation in the abo	
	at Successor Letters Testamentary be grant persons entitled thereto without any notice	
Date	Signature	Street Address
	Print Name	City/State/Zip
STATE OF NEW YORK COUNTY OF	SS.:	
On		, before me personally appeared
	person described in and who executed the duly acknowledged that he/she executed	ne foregoing instrument. Such person duly swore to such ed the same.
Notary Public Commission Expires: (Affix Notary Stamp or S	Seal)	
Name of Attorney		Tel. No.:
Address of Attorney		
SLT-2 (04/2011)		

Deceased. The undersigned,	STATE OF NEW YORK	OF		
RENUNCIATION OF SUCCESSOR LETTERS TESTAMENTARY AND WAIVER OF PROCESS (CORPORATION) File No	SURROGATE'S COURT. COUNTY	OF	X	
RENUNCIATION OF SUCCESSOR LETTERS TESTAMENTARY AND WAIVER OF PROCESS (CORPORATION) File No	In the Matter of the Petition for Succ	essor Letters Testame	entary	
LETTERS TESTAMENTARY AND WAIVER OF PROCESS (CORPORATION) File No	in the Estate of		DENIU	NOIATION OF SUCCESSOR
a/k/a Deceased. X The undersigned,				
Deceased. The undersigned,				
Deceased	a/k/a			
The undersigned,			File No.	
The undersigned,		Deceased		
The undersigned,		Deceased.	X	
interested in this estate as alternate executor, hereby personally appears in this proceeding in the Surrogate's Court of				
	The undersigned,			, a person
1. Renounces all rights to Successor Letters Testamentary. 2. Waives the issuance and service of citation in the above-entitled proceeding. 3. Consents that Successor Letters Testamentary be granted by the Court to or any other person or persons entitled thereto without any notice whatsoever to the undersigned. (Signature) (Rame of Corporation) (Print Name) (Print Name) (Principal Office Street Address) (City/Town/Village) (State) (Zip) Date: STATE OF NEW YORK COUNTY OF ss.: On on on to me known, who duly swore to the foregoing instrument and who did say that he/she resides at of sacciation described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Tel. No.: Address of Attorney Tel. No.: Address of Attorney		장면 그 그 이 아들이 있었다. 아들이 얼마나 아들이 되었다면 하지만 하지만 하지 않는데 그렇게 되었다.	rsonally appears in this proce	eding in the Surrogate's Court of
2. Walves the issuance and service of citation in the above-entitled proceeding. 3. Consents that Successor Letters Testamentary be granted by the Court to or any other person or persons entitled thereto without any notice whatsoever to the undersigned. (Signature) (Print Name) (Print Name) (Print Name) (City/Town/Village) (State) (Zip) Date: STATE OF NEW YORK COUNTY OF ss.: On	County	/ and		
2. Walves the issuance and service of citation in the above-entitled proceeding. 3. Consents that Successor Letters Testamentary be granted by the Court to or any other person or persons entitled thereto without any notice whatsoever to the undersigned. (Signature) (Print Name) (Print Name) (Print Name) (City/Town/Village) (State) (Zip) Date: STATE OF NEW YORK COUNTY OF ss.: On	1. Renounces all rights to S	Successor Letters Test	amentary.	
3. Consents that Successor Letters Testamentary be granted by the Court to or any other person or persons entitled thereto without any notice whatsoever to the undersigned. (Signature) (Print Name) (Print Name) (Principal Office Street Address) (City/Town/Village) (State) (Zip) Date: STATE OF NEW YORK COUNTY OF ss.: On , before me personally appeared , to me known, who duly swore to the foregoing instrument and who did say that he/she resides at he/she is a of , the corporation/national banking association described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal)			9-1	
(Signature) (Print Name) (Print Name) (City/Town/Village) (State) (Zip) Date: On, before me personally appeared, to me known, who duly swore to the foregoing instrument and who did say that he/she resides at, the corporation/ational banking association described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal)	Waives the issuance and	service of citation in t	he above-entitled proceeding.	
(Signature) (Print Name) (Print Name) (City/Town/Village) (State) (Zip) Date: On, before me personally appeared, to me known, who duly swore to the foregoing instrument and who did say that he/she resides at, the corporation/ational banking association described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal)	3 Consents that Successor	Latters Testamentary	as granted by the Court to	
(Signature) (Print Name) (Principal Office Street Address) (City/Town/Village) (State) (Zip) Date: STATE OF NEW YORK COUNTY OF SS.: On, before me personally appeared, to me known, who duly swore to the foregoing instrument and who did say that he/she resides at and that he/she is a of, the corporation/national banking association described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Tel. No.:				
(Print Name) (Print Name) (Principal Office Street Address) (City/Town/Village) (State) (Zip) Date: STATE OF NEW YORK COUNTY OF ss.: On, before me personally appeared, to me known, who duly swore to the foregoing instrument and who did say that he/she resides at, the corporation/national banking association described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Tel. No.: Address of Attorney Tel. No.:	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(Print Name) (Print Name) (Principal Office Street Address) (City/Town/Village) (State) (Zip) Date: STATE OF NEW YORK COUNTY OF ss.: On, before me personally appeared, to me known, who duly swore to the foregoing instrument and who did say that he/she resides at, the corporation/national banking association described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Tel. No.: Address of Attorney Tel. No.:				
(Print Name) (Print Name) (Principal Office Street Address) (City/Town/Village) (State) (Zip) Date: STATE OF NEW YORK COUNTY OF ss.: On, before me personally appeared, to me known, who duly swore to the foregoing instrument and who did say that he/she resides at, the corporation/national banking association described in and which executed such instrument; and that he/she signed his/her name thereto by order of the Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Tel. No.: Address of Attorney Tel. No.:	(0)		(NI and	of Operation)
Date:	(Signature)		(Name	of Corporation)
Date:			in the second se	
STATE OF NEW YORK COUNTY OF ss.: On	(Print Name)		(Princip	oal Office Street Address)
STATE OF NEW YORK COUNTY OF ss.: On		•		
STATE OF NEW YORK COUNTY OF ss.: On			(City/Town Village)	(State) (Zin)
STATE OF NEW YORK COUNTY OF ss.: On			(City/Town/Village)	(State) (ZIP)
On	Date:			
On				
On	STATE OF NEW YORK			
On		66.		
	OCCIVITION	33		
Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Tel. No.: Address of Attorney	On		,	_, before me personally appeared
Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Address of Attorney Address of Attorney				
Board of Directors of the corporation. Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Tel. No.: Address of Attorney	duly swore to the foregoing instrume	ant and who did say th	at ha/sha rasidas at	, to me known, who
Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Address of Attorney Address of Attorney	he/she is a	of	at fie/site resides at	the corporation/national banking
Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Address of Attorney Address of Attorney	association described in and which	executed such instrum	ent; and that he/she signed his	s/her name thereto by order of the
Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney	Board of Directors of the corporation	1.		
Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney				
Notary Public Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney				
Commission Expires: (Affix Notary Stamp or Seal) Name of Attorney Tel. No.: Address of Attorney	Notary Public			
Name of Attorney Tel. No.: Address of Attorney	Commission Expires:			
Address of Attorney	(Affix Notary Stamp or Seal)			
Address of Attorney				
Address of Attorney				
Address of Attorney	Name of Attorney		Tel. No.:	
SLT-3 (04/2011)	Address of Attorney			
	SLT-3 (04/2011)			

SURROGATE'S COURT: COU			
	X Successor Letters Testamentary		
in the Estate of		5.707.	TICE OF PETITION FOR APPOINTMENT OF
a/k/a			ICCESSOR EXECUTOR
		File	No
	DeceasedX		
Notice is hereby given that:	6		
1. The Will of the above-na	amed decedent was admitted to prob	oate by the Surrogate	e's Court of
County on	, and Letters Testamen	tary were issued to	8
who on	, [] died [] other (specif	fy)	··································
2. The name (s) of the Succ	cessor Executor (s) of said Will is/are		
			, whose
address(es) is/are	5 1.0 - 1		
	9		
 The names and address 	s of all persons and parties who are	named in the will as	s fiduciaries or beneficiaries who have
not appeared or have been serv	ved or waived service of process.		
NAME	MAILING ADDRE	ESS	NATURE OF INTEREST OR STATUS
	**		N 0
	-		
	-		
[Note: If serving infant 14 yea	rs of age or older, list and mail to	o infant as well as	parent or guardian.]
(USE ADDITIONAL SHEETS IF	· NECESSARY)		
Date:	, 20		
	for Appointment of Successon ired, complete Affidavit of Ma		or may not be required in all
Name of Attorney:		Tel. No.:	
SLT-4 (04/2011)			

AFFIDAVIT OF MAILING NOTICE OF PETITION FOR APPOINTMENT OF SUCCESSOR EXECUTOR

STATE OF NEW YORK)	
COUNTY OF) ss.:)	
A V TO THE REAL PROPERTY OF THE PARTY OF THE	, residing at	, being dul
sworn, says that he/she is over the ag	e of 18 years, that on the	day of
20, he/she deposited in a post	office box regularly maintained b	by the government of the United States in the
of	, State of New York,	a copy of the foregoing Notice of Petition fo
Appointment of Successor Executor con	tained in a securely closed postpaid	d wrapper directed to each of the persons named
in said Notice at the places set opposite	their respective names.	
Sworn to before me this	_	Signature
day of, 20	_	
		Print Name
Notary Public Commission Expires: (Affix Notary Stamp or Seal)		
Name of Attorney	т	el. No.:
Address of Attorney		

File	No.	

SURROGATE'S COURT -	COUNTY
CITATION	

THE PEOPLE OF THE STATE OF NEW YORK, By the Grace of God Free and Independent

TO:						
7						
A petition hav	ing been filed by					, who is
			re the Surrogate's Court, _			
			made in the estate of			
[] Success	or Letters Testame	ntary issue to				·
			LIONI			
Dated, Attested and S	ealed,		HON	Surro	gate	
(Seal)	· · · · · · · · · · · · · · · · · · ·	_		Chief	Clerk	
(Offici	Olork	
Attorney for P	etitioner			Telep	hone Numb	 er
				,,,		
		Address of A	Attorney			

[NOTE: This citation is served upon you as required by law. You are not required to appear. If you fail to appear it will be assumed you do not object to the relief requested. You have a right to have an attorney appear for you.]

SLT-5 (04/2011)