Delaware Division of Corporations
401 Federal Street – Suite 4
Dover, DE 19901
Ph: 302-739-3073
Fax: 302-739-3812

Certificate of Amendment to Statutory Trust

Dear Sir or Madam:

Enclosed please find a Certificate form to be filed in accordance with the General Corporation Law of the State of Delaware. The fee to file the Certificate is $200.00. If you wish to obtain a certified copy of the filing, please request it within your cover letter and include an additional $50.00 per certified copy requested. Otherwise, you will receive a file stamped plain copy at no additional charge. Expedited services are available. Please contact our office concerning these fees.

Please make your check payable to "Delaware Secretary of State". For the convenience of processing your order in a timely manner, please include a cover letter with your name, address and telephone/fax number to enable us in contacting you if necessary. Please make sure you thoroughly complete all information requested on this form. It is important that the execution be legible, we request that you print or type your name under the signature line.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don't hesitate to call at (302) 739-3073.

Sincerely,

Department of State
Division of Corporations

encl.
rev. 06/04

STATE OF DELAWARE
CERTIFICATE OF AMENDMENT TO
CERTIFICATE OF TRUST

Pursuant to Title 12, Section 3810(b) of the Delaware Statutory Trust Act, the undersigned Trust executed the following Certificate of Amendment:

1. Name of Statutory Trust: _____

_____

2. The Certificate of Amendment to the Certificate of Trust is hereby amended as follows:

[set forth amendment(s)]

3. (Please complete with either **upon filing** or it may be a ***future effective date*** that is within 90 days of the file date) This Certificate of Amendments shall be effective _____.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the _____ day of _____, _____ A.D.

By:_____

Trustee

Name: _____

Type or Print