AMENDMENT TO TRUST

| | THIS Amendr | nent, is being | made on | this the | | day of | | , | |
|----|--|----------------|---------|----------|----|-----------|-----------|---------|--|
| 20 | , by | _ | | | of | (| County, S | tate of | |
| | , a | s the Trustor | of THE | | | REVOCABLE | TRUST | dated | |
| | | | | | | | | | |
| | Trustor(s) do hereby amend the trust mentioned above as follows: | | | | | | | | |
| | 1. | | | | | | | | |
| | 2. | | | | | | | | |
| | 3. | | | | | | | | |
| | 4. | | | | | | | | |
| | | | | | | | | | |

Except as amended, all other terms and provisions of the trust are to remain in full force and effect.

DATED this the _____ day of _____, 20____.

Trustor Signature Print Name _____

| Trustor Signature | |
|-------------------|--|
| Print Name | |

STATE OF OHIO

COUNTY OF _____

The foregoing instrument was acknowledged before me this ______(date) by ______ (name of person acknowledged.)

Notary Public

Printed Name: _____

My Commission Expires: