Exhibit D

Purported Marriage Certificate
of Ms. A. R.

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES • REGISTRAR-RECORDER/COUNTY CLERK

LICENSE AND CERTIFICATE OF CONFIDENTIAL MARRIAGE

DUP.LIC.F.C.360

STATE FILE NUMBER: 5 2004 19 012617 (LOCAL REGISTRATION NUMBER)

LICENSE NUMBER: NNC000361

HUSBAND PERSONAL DATA

1A. NAME OF HUSBAND—First (Given)	1B. MIDDLE	1C. LAST (FAMILY)	2. DATE OF BIRTH—Month, Day, Year
	–		05/03/1980

3. STATE OF BIRTH	4. NUMBER OF PREVIOUS MARRIAGES	5A. LAST MARRIAGE ENDED BY:	5B. DATE—Month, Day, Year
MX	00	☐ DEATH ☐ DISSOLUTION ☐ ANNULMENT	–

6A. USUAL OCCUPATION	6B. USUAL KIND OF BUSINESS OR INDUSTRY	7. EDUCATION—YEARS COMPLETED
PAINTER	CONSTRUCTION	03

8A. FULL NAME OF FATHER	8B. STATE OF BIRTH	9A. FULL MAIDEN NAME OF MOTHER	9B. STATE OF BIRTH
	MX		MX

WIFE PERSONAL DATA

10A. NAME OF WIFE—First (Given)	10B. MIDDLE	10C. LAST (FAMILY)	10D. MAIDEN LAST (FAMILY) IF DIFFERENT
ALETHA	AMBER	MCWHORTER	–

11. DATE OF BIRTH—Month, Day, Year	12. STATE OF BIRTH	13. NUMBER OF PREVIOUS MARRIAGES	14A. LAST MARRIAGE ENDED BY:	14B. DATE—Month, Day, Year
12/01/1981	TN	00	☐ DEATH ☐ DISSOLUTION ☐ ANNULMENT	–

15A. USUAL OCCUPATION	15B. USUAL KIND OF BUSINESS OR INDUSTRY	16. EDUCATION—YEARS COMPLETED
HOUSEWIFE	DOMESTIC	

17A. FULL NAME OF FATHER	17B. STATE OF BIRTH	18A. FULL MAIDEN NAME OF MOTHER	18B. STATE OF BIRTH
JESSE WAYNE MCWHORTER	TN	WANDA ADAMS	TN

RESIDENCE OF HUSBAND AND WIFE

19A. RESIDENCE—Street and Number	19B. CITY	19C. ZIP CODE	19D. COUNTY—Outside California, Enter State
4138 ATLANTIC AVE	LONG BEACH	90807	LOS ANGELES

20A. MAILING ADDRESS—If Different	20B. CITY	20C. ZIP CODE	20D. COUNTY—Outside California, Enter State
–	–	–	–

AFFIDAVIT

We the undersigned declare that we are an unmarried man and an unmarried woman, not minors, and have been living together as husband and wife and that the foregoing information is true and correct to the best of our knowledge and belief, that no legal objection to the marriage nor to the issuance of a license is known to us, and hereby apply for a License and Certificate of Confidential Marriage.

21. SIGNATURE OF HUSBAND: /S/

22. SIGNATURE OF WIFE: /S/ ALETHA AMBER MCWHORTER

The undersigned, empowered by the laws of the State of California, do hereby certify that the above-named parties to be married have personally appeared before me, proved to me on the basis of satisfactory evidence, have declared or affirmed that they meet all the requirements of the law, and the fees prescribed by law having been paid, do hereby authorize said parties to be married pursuant to Section 4213, Civil Code OR that this license was issued to the person performing the ceremony upon that person's presentation of an affidavit signed by the person and the parties to be married due to the inability of one or both of the parties to be married to physically appear. The affidavit explains the reason for inability to appear in accordance with Section 4213.1, Civil Code.

23A. SIGNATURE AND TITLE OF ISSUING CLERK: DEPUTY

23B. COUNTY OF ISSUE: LOS ANGELES

23C. MAILING ADDRESS AND ZIP CODE: 12400 IMPERIAL HWY. NORWALK, CA. 90650

23D. ISSUE DATE—Month Day Year: 02/03/2004

23E. LICENSE EXPIRES AFTER—Month Day Year: 05/03/2004

24A. AFFIX NOTARY SEAL (If Applicable): MARIA C. PINZON, Commission # 1[illegible], Notary Public - California, Los Angeles County, My Comm. Expires Oct 30, 2004

24B. "SUBSCRIBED AND SWORN TO BEFORE ME ON" 02/04/2004 (MONTH DAY YEAR)

SIGNATURE OF NOTARY: MARIA O PINZON (Typed Name of Notary)

CERTIFICATION OF PERSON SOLEMNIZING MARRIAGE

25. I hereby certify that the above-named man and woman were joined by me in marriage in accordance with the laws of the State of California.

ON FEBRUARY (MONTH) 04 (DAY) 2004 (YEAR)

AT LONG BEACH (CITY OR TOWN) LOS ANGELES (COUNTY) CALIFORNIA

NOTE: THIS MARRIAGE MUST TAKE PLACE IN THE COUNTY IN WHICH THE LICENSE WAS ISSUED.

26A. SIGNATURE OF PERSON SOLEMNIZING MARRIAGE

26B. RELIGIOUS DENOMINATION (IF CLERGY): CHRISTIAN

26C. NAME OF PERSON SOLEMNIZING MARRIAGE (TYPE OR PRINT): [illegible] VIRGILIA

26D. OFFICIAL TITLE: REVEREND

26E. MAILING ADDRESS (Include City and State): 4138 ATLANTIC AVE., LONG BEACH, CA.

26F. ZIP CODE: 90807

COUNTY CLERK

27A. SIGNATURE OF COUNTY CLERK: Conny B. McCormack

27B. SIGNATURE OF DEPUTY CLERK (If applicable): BY Jasmin Adelle, DEPUTY

28B. DATE ACCEPTED FOR REGISTRATION: AUG 12 2004

OSP 99 30953 MUST BE LEGIBLE/MAKE NO ERASURES, WHITEOUTS OR OTHER ALTERATIONS—SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS VS 123 (1/00)

EXHIBIT A

This is to certify that this document is a true copy of the official record filed with the Registrar-Recorder/County Clerk. SEP 09 2004

Conny B. McCormack
CONNY B. McCORMACK
Registrar-Recorder/County Clerk

19-0894499

This copy not valid unless prepared on engraved border displaying Seal and Signature of the Registrar-Recorder County Clerk.