

STATE OF CALIFORNIA
 CERTIFICATION OF VITAL RECORD

COUNTY OF LOS ANGELES • REGISTRAR-RECORDER/COUNTY CLERK

CERTIFICATE OF LIVE BIRTH
 STATE OF CALIFORNIA
 USE BLACK INK ONLY

LOCAL REGISTRATION NUMBER
 1201119045906

1A NAME OF CHILD - FIRST TAKUMI		1B MIDDLE RYAN		1C LAST MORIYA	
2 SEX MALE		3A THIS BIRTH, SINGLE, TWIN, ETC SINGLE		3B IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC -	
5A PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY PROVIDENCE LCM-TORRANCE		5B STREET ADDRESS - STREET AND NUMBER, OR LOCATION 4101 TORRANCE BLVD			
5C CITY TORRANCE		5D COUNTY LOS ANGELES			
6A NAME OF FATHER/PARENT - FIRST YASUSHI		6B MIDDLE -		6C LAST MORIYA	
9A NAME OF MOTHER/PARENT - FIRST HANNA		9B MIDDLE HANNA		9C LAST - BIRTH NAME KUME	
12A CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE		12B PARENT OR OTHER INFORMANT - SIGNATURE <i>[Signature]</i>		12B RELATIONSHIP TO CHILD Mother	
12C DATE SIGNED MM/DD/CCYY 06/30/1973		10 BIRTHPLACE STATE/COUNTRY JAPAN			
6A NAME OF FATHER/PARENT - FIRST YASUSHI		6B MIDDLE -		6C LAST MORIYA	
9A NAME OF MOTHER/PARENT - FIRST HANNA		9B MIDDLE HANNA		9C LAST - BIRTH NAME KUME	
10 BIRTHPLACE STATE/COUNTRY JAPAN		11 DATE OF BIRTH MM/DD/CCYY 01/29/1972			
12A CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE		12B PARENT OR OTHER INFORMANT - SIGNATURE <i>[Signature]</i>		12B RELATIONSHIP TO CHILD Mother	
12C DATE SIGNED MM/DD/CCYY 05/27/2011		13B LICENSE NUMBER A101561			
13C DATE SIGNED MM/DD/CCYY 05/27/2011		14 TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT Nicole Weber Supervisor			
15A CERTIFY THAT THE CHILD WAS BORN ALIVE AT THE DATE HOUR AND PLACE STATED		15A ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE <i>[Signature]</i>		15A ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE Nicole Weber Supervisor	
13D TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT SHAHRYAR MASOUM, MD, 4101 TORRANCE BLVD., TORRANCE		16 LOCAL REGISTRAR - SIGNATURE JONATHAN E FIELDING, MD			
15B STATE FILE NO. - STATE USE ONLY		17 DATE ACCEPTED FOR REGISTRATION MM/DD/CCYY 06/07/2011			

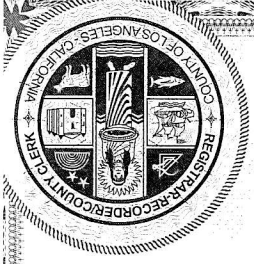
This is to certify that this document is a true copy of the official record filed with the Registrar-Recorder/County Clerk.

DEAN C. LOGAN
 Registrar-Recorder/County Clerk



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AUG 03 2011



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE