, TYPE OR PRINT, BLACK INK ONLY)

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS)

TELEPHONE MUMBER

(FOR COURT USE ONLY)

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LOS ANGELES SUPERIOR COURT

JOHN BURTON
343 s. Detroit st. Apt #101
Los Angeles, California, 90036

Attorney(s) For

PC 162/3-63

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

IN THE MATTER OF THE PETITION OF (NAME):

JOHN RUBEN BURTON HILDA TOBIAS FURTON WILLIAM HENRY BURTON

FOR CHANGE OF NAME.

R\$n2\422

403

PETITION FOR CHANGE OF NAME

HEARING DATE: Sept. 9, 1994

TIME 9:00

DEPT: /A

	-#-	PRESENT NAME OF PERSON SWIDSE MANE IS TO BE CHANCED.
and	if under 18 years of age by _	PLANE OF PANDAT OR GLAPICARY
(rela	utionship to petitioner)	decisres:
		STATE PEARCORPY
4.	Petitioner	
	¿™ over 18 years of age.	
		e. Date of birth: 07-22-55, 3-31-32, & 08-07-72
2.	Petitioner's place of birth: 12	s Angeles USA, the Republic of Guatemala, & Los Angeles USA.
3.	Detrionarie present strictes	343 s. Detroit street \$101, Ibs Angeles, CA., 90036
64	is all an abuse a second and a fibre of a second and a second abuse and a	GINEEL CITY MO COANTY)
А	Petitioner's present name: J	OHN RUBEN BURTON, HILDA TOBIAS BURTON, WILLIAM HENRY BURTON
4		The first the fi
5.	Petitioner's proposed name:	JOHN FITTGERALD KENNEDY, HILDA TOBIAS KENNEDY, WILLIAM HENRY KENNEDY.
5.	Petitioner's proposed name:	JOHN FITT GERALD KENNEDY, HILDA TOBIAS KENNEDY, WILLIAM HENRY
5. 6.	Petitioner's proposed name: Reason for proposed change	JOHN FITTGERALD KENNEDY, HILDA TOBIAS KENNEDY, WILLIAM HENRY KENNEDY.
5. 6. the	Petitioner's proposed name: Reason for proposed chang determined biological	JOHN FITYGERALD KENNEDY, HILDA TORIAS KENNEDY, WILLIAM HENRY KENNEDY. • of name. The parties herein have retained an Attorney to correct
5. 6. the	Petitioner's proposed name: Reason for proposed chang- determined biological itimate offspring of P	JOHN FITZGERALD KENNEDY, HILDA TORIAS KENNEDY, WILLIAM HENRY KENNEDY. of name. The parties herein have retained an Attorney to correct names of these petitioning. Such as John R. Burton is the

Appendix I.

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS)

TELEPHONE NUMBER

FOR COURT USE ONLY)

JOHN BURTON 543 s. Detroit st. Apt #101 Los Angeles, California, 90036

LOS ANGELES SUPERIOR COURT

Attorney(s) For

Contract of the Contract of th

SEP 0 9 1994 ()

EDWARD M KRITZMAN, LLERK BY M WIGGINS DEPUTY

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

IN THE MATTER OF THE PETITION OF (NAME):

JOHN RUBEN BURTON HILDA TOBIAS BURTON WILLIAM HENRY BURTON

DECREE CHANGING NAME

HEARING DATE: Sept 9, 1994

TIME: 9:00 4. M

FOR CHANGE OF NAME.

DEPT: 1A The petition of JOHN RUBEN BURTON, HILDA TOBIAS BURTON, AND WILLIAM HENRY BURTON

by MID Davents for an order of court changing THEIR mame(s) to JOHN FITZGERALD KENNEDY, HILDA TOBIAS

KENNEDY, AND WILLIAM HENRY KENNEDY.

(PROPOSED NAME(S))

in place of THETR present name(s) came on regularly to be heard in Department of the above-entitled court on , and proof having been made

MONTH, DAY, YEAR) to the satisfaction of the court that notice of hearing was given in the manner and form required by law and order of this court, and no objections having been filed by any person, and evidence having been produced on behalf of petitioner(s) in support of the petition, and the court being satisfied that there is no reasonable objection to the petitioner(s) assuming the name(s) proposed; and it appearing to the satisfaction of the court that all the allegations of the petition are true and that the order sought should be granted:

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that petitioner(s) name(s) of John Rober Bunton, Hilda Tobias Burston, William Henry unthis

is/are hereby changed to John Fitzgerald Kennedy; Hilda Tobias William Henry Kewed

SEP 0-9.994 Dated:

RC 164/3-53

- NAUKWAY GROSS COMBASSIONER

405

Appendix J.

PARTY WITHOUT AN ATTORNEY (Name and Address): TELEPHONE NO.	FOR COURT USE ONLY
John Burton, Hilda Tobias Burton, and William Henry Burton. 343 South Detroit Street, Apartment Number 101 Los Angles, California, 90036-0542	
In Pro Per	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF: Los Angeles. STREET ADDRESS: 111 North Hill Street, Department 1A. MAILING ADDRESS: 111 North Hill Street, Department 1A. CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Los Angles.	
INTHEMATTER OF THE APPLICATION OF: John Ruben Burton, Hilda Tobias Burton, and William Henry Burton.	
PROOF OF SERVICE (NAME CHANGE)	CASENUMBER. BS029422

I declare that:

- 1. At the time of service I was at least 18 years of age and not a party to this legal action.
- 2. My business or residence address is: 361 Salem it #5 Grendale CA 91203
- 3. I served copies of the Order to show Cause for Change of Name in the manner shown (check either a or b below):
 - a.

 Personal Service. I personally delivered these papers to:
 - (1) Name of person served:
 - (2) Address where served:
 - (3) Date served:
 - (4) Time served:
 - b. Certified mail, return receipt requested. I deposited these papers in the United States mail, in a sealed envelope with postage fully prepaid. I used certified mail and requested a return receipt. The envelope was addressed and mailed to:
 - (1) Name of person served: U.S. Ambassador to Ireland, Jean Ann Kennedy Smith.
 - (2) Address to which documents were mailed: The United States Embassy in Ireland, 42 Egin Road, Ballbridge Dubland, Ireland, Europe.
 - (3) Date documents were mailed: July 26, 1994.
 - (4) City and State where mailing occurred: Los Angeles, California.
 - (5) The signed return receipt is attached. Postal Identification: [R-324-232-705]
- 4. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

COTTECL		
Date: 9/11/94 2 1 2	1211	
Redro Reyes	The Hay	and the state of t
(Type or Print Name of Process Server)	Signature of Process Server	

PROOF OF SERVICE (NAME CHANGE)

N

SENDER: Complete items 1 and/or 2 for additional services.	F.V.,	I also wish to receive th
Complete items 3, and 4a & b.		following services (for an extr
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um this card to your		1. Addressee's Address
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Write "Return Receipt Requested" on the malipiece below the artic		2. Sestricted Delivery
The Return Receipt will show to whom the article was delivered and the		Consult postmaster for fee.
delivered. 3. Article Addressed to:	An A-4	icle Nurcher: An
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no throught So Edward M. Kensely	1 1	0001001
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409 J.F.K. Federal Building	☐ Regi	
	Cert	
Boston, Massachusetts,	[] Expr	ess Mail
	7. Date	of Delivery
08263	9	1201024
	5	170/1/2016
5. Signature (Addressey)		ressee's/Address (Only if request fee is paid)
1300 DILLEGE		
6/Sighature (Agent).		
i ich		
PS Form 3811, December 1991 ±U.S. GPC: 1989-352	954 294	OMESTIC RETURN RECEI

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ENDER: Complete frems 1 and/or 2 for additional services.		
ENDER: Complete frems 1 and/or 2 for additional services. Complete frems 3, and 4a & b.	we can	following services (for an extra
EMDER: Complete forms 1 and/or 2 for additional services. Complete items 3, and 4a & b. Print your name and address on the reverse of this form so that turn this card to you.		following services (for an extra fee):
ENDER: Complete frems 1 and/or 2 for additional services. Complete frems 3, and 4a & b. Print your name and address on the reverse of this form so that turn this cerd to you. Attach this form to the front of the mailpiece, or on the back if		following services (for an extra
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ENDER: Complete items 1 and/or 2 for additional services. Complete items 3, and 4a & b. Print your name and address on the reverse of this form so that stam this cord to you. Attach this form to the front of the mailpiece, or on the back if ones not permit. Write "Return Receipt Requested" on the mailpiece below the article. The Return Receipt will show to whom the article was delivered as elivered. 3. Article Addressed to: YAN ANN WENNER Smith	space le number di the date 4a. Artis 2.0c 4b. Sen	1. Addresses's Address 2. Restricted Delivery Consult postmaster for fee. cle Number 25 940 279 nice Type
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ENDER: Complete forms 1 and/or 2 for additional services. Complete forms 3, and 4a & b. Print your name and additions on the reverse of this form so that stam this card to you. Attach this form to the front of the mailpiece, or on the back if sees not permit. Write "Return Receipt Requested" on the mailpiece below the article. The Return Receipt will show to whom the article was delivered ask glivered. 3. Article Addressed to: JEAN ANN WELNERY Smith 200 East Gold Sheet	spece le number di the dete 4a. Artis 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	following services (for an extra fee): 1. Addresses's Address 2. Restricted Delivery Consult postmaster for fee. cle Number 25 940 977 vice Type stared Insured fied COD
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PARTY WITHOUT ANATTORNEY (Name and Address):	TELEPHONE NO.	FOR COURT USE ONLY
John Burton, Hilda Tobías Burton, and William Henry Burton 343 South Detroit Street, Apartment Number 101 Los Angles, California, 90036-0542	•	
In Pro Per		
SUPERIOR COURT OF CALIFORNIA, COUNTY STREET ADDRESS: 111 North Hill Street, Department MAILING ADDRESS: 111 North Hill Street, Department CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Los Angles.	IA.	
INTHEMATTEROFTHE APPLICATIONOF: John Ruben, Burton, Hilda Tobias Burton, and William Henry	Burton.	
PROOF OF SERVICE (NAME CH	angeneral and a second	CASENIMBER BS029422

I declare that:

- 1. At the time of service I was at least 18 years of age and not a party to this legal action.
- 2. My business or residence address is: 34 | Salem st #5 Glandale CA. 51203
- 3. I served copies of the Order to show Cause for Change of Name in the manner shown (check either a or b below):
 - a. Personal Service. I personally delivered these papers to:
 - (1) Name of person served:
 - * (2) Address where served:
 - (3) Date served:
 - (4) Time served:
 - b. Certified mail, return receipt requested. I deposited these papers in the United States mail, in a sealed envelope with postage fully prepaid. I used certified mail and requested a return receipt. The envelope was addressed and mailed to:
 - (1) Name of person served: The Honorable Senator Edward Moore Kennedy.
 - (2) Address to which documents were mailed: 409 J.F.K. Federal Building, Boston, Massachusetts. 02203.
 - (3) Date documents were mailed: July 26, 1994.
 - (4) City and State where mailing occurred: Los Angeles, California.
 - (5) The signed return receipt is attached. Postal Identification Number: [P-025-940-277].
- 4. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Oate: 9107 194

Pedro Reges

(Type or Print Name of Process Server)

Signature of Process Server

PROOF OF SERVICE (NAME CHANGE)

PARTY WITHOUT AN ATTORNEY (Name and Address):	TELEPHONE NO:	FOR COURT USE ONLY	Malone
John Burton, Hilda Tobías Burton, and William Henry Burton 343 South Detroit Street, Apartment Number 101 Los Angles, California, 90036-0542			
In Pro Per			
SUPERIOR COURT OF CALIFORNIA, COUNT STREET ADDRESS: 111 North Hill Street, Department I MAILING ADDRESS: 111 North Hill Street, Department CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Los Angles.	A.		
INTHEMATTEROFTHE APPLICATION OF:			
John Ruben Burton, Hilda Tobías Burton, and William Henry	Sixton.		
PROOF OF SERVICE (NAME CHA	NGE)	CASENT MBER: BS029422	Anadis tils

I declare that:

- 1. At the time of service I was at least 18 years of age and not a party to this legal action.
- 2. My business or residence address is: 341 Salen of #5 Glendale (4 91203
- 3. I served copies of the Order to show Cause for Change of Name in the manner shown (check either a or b below):
 - a. D Personal Service. I personally delivered these papers to:
 - (1) Name of person served:
 - (2) Address where served:
 - (3) Date served:
 - (4) Time served:
 - b. Certified mail, return receipt requested. I deposited these papers in the United States mail, in a sealed envelope with postage fully prepaid. I used certified mail and requested a return receipt. The envelope was addressed and mailed to:
 - (1) Name of person served: Jean Ann Kennedy Smith.
 - (2) Address to which documents were mailed: 220 East 62nd Street, New York City, New York, 10021-8201.
 - (3) Date documents were mailed: July 26, 1994.
 - (4) City and State where mailing occurred: Los Angeles, California.
 - (5) The signed return receipt is attached. Postal Identification: [P-025-940-279]
- 4. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:	
Pedro Reyes sinky	Feel Mend
(Type or Print Name of Process Server)	Signature of Process Server

PROOF OF SERVICE (NAME CHANGE)

PROOF OF SERVICE (NAME CHANGE)	CASENLMBER. BS029422
INTHEMATTEROFTHE APPLICATION OF: John Ruben Burton, Hilda Tobías Burton, and William Henry Burton.	Water and the second se
SUPERIOR COURT OF CALIFORNIA, COUNTY OF: Los Angeles. STREET ADDRESS: 111 North Hill Street, Department 1A. MAILING ADDRESS: 111 North Hill Street, Department IA. CITY AND ZIP CODE: Los Angeles, 90012 BRANCH NAME: Los Angles.	
PARTY WITHOUT AN ATTORNEY (Name and Address): TELEPHONE NO. John Burton, Hilda Tobías Burton, and William Henry Burton. 343 South Detroit Street, Apartment Number 101 Los Angles, California, 90036-0542 In Pro Per	FOR COURT USE ONLY

- 1. At the time of service I was at least 18 years of age and not a party to this legal action.
- 2. My business or residence address is: 361 SALEM St #5 Glandale (A. 91203
- 3. I served copies of the Order to show Cause for Change of Name in the manner shown (check either a or b below):
 - a.

 D Personal Service. I personally delivered these papers to:
 - (1) Name of person served:
 - (2) Address where served:
 - (3) Date served:
 - (4) Time served:
 - b. Certified mail, return receipt requested. I deposited these papers in the United States mail, in a sealed envelope with postage fully prepaid. I used certified mail and requested a return receipt. The envelope was addressed and mailed to:
 - (1) Name of person served: The Honorable Senator Edward Moore Kennedy.
 - (2) Address to which documents were mailed: 315 Russell Building, Washington D.C., 20510-0505.
 - (3) Date documents were mailed: July 26, 1994.
 - (4) City and State where mailing occurred: Los Angeles, California.
 - (5) The signed return receipt is attached. Postal Identification Number: 1 P-025-940-278].
- 4. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Pedro Reger

(Type or Print Name of Process Server)

Signature of Process Server

PROOF OF SERVICE (NAME CHANGE)