



**THE GRAND COURT OF THE CAYMAN ISLANDS
PROBATE & ADMINISTRATION**

**CAUSE NO. OF 2022
PROBATE & ADMINISTRATION NO. OF 2022**

IN THE ESTATE OF LUCILLE JUANITA RABAINO RICO, A.K.A LUCILLE CHRISTIAN BARNES A.K.A LUCILLE JUANITA BARNES, A.K.A LUCILLE JUANITA CHRISTIAN BARNES, A.K.A. LUCILLE BARNES, DECEASED

APPLICATION FOR LETTERS OF ADMINISTRATION

I, **JENNIE LOLETTA MOORE**, of P.O. Box 1309, Grand Cayman KY1-1108, Cayman Islands hereby apply for a Grant of Letters of Administration of the estate of the late **LUCILLE JUANITA RABAINO RICO, AKA LUCILLE CHRISTIAN BARNES, A.K.A LUCILLE JUANITA BARNES, AKA LUCILLE JUANITA CHRISTIAN BARNES, A.K.A LUCILLE BARNES** who resided at 100 Rankin Drive, George Town, Grand Cayman who died at Health City, East End, Grand Cayman on the 15th day of November 2021 intestate.

And I annex hereto my Affidavit in Support of my application and the Certificate of death of the late **Lucille Juanita Rabaino Rico a.k.a Lucille Christian Barnes, a.k.a. Lucille Juanita Barnes, a.k.a Lucille Juanita Christian Barnes, a.k.a Lucille Barnes, deceased.**

BOND

AND I declare myself and my successors to be jointly and severally bound unto the Minister of Finance of the Cayman Islands in the Sum of CI\$3,832,000.00.

Dated this *13* day of January, 2022

And Sealed with my Seal.

The condition of this obligation is that if the above named do, when Lawfully called upon in that behalf, make or cause to be made a true and perfect inventory of the said estate and do exhibit the same in the Probate Registry whenever lawfully called upon so to do well and truly administer the said Estate according to Law and do make or cause to be made a Just account and distribution account thereof whenever lawfully so required and, if, hereafter any Will of the deceased may be

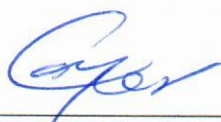
This Application is filed by Waide DaCosta, Attorney-at-Law, Unit #1, Eucalyptus Building, Shedden Road, George Town, P.O. Box 591, Grand Cayman KY1-1502, CAYMAN ISLANDS.

propounded, to yield up, the Letters of Administration to the Probate Registry, then this obligation shall be void and of no effect, but shall otherwise remain in force and effect.

Sworn to before me at
Grand Cayman on the *13* day of *January*, 2022



Jennie Loletta Moore



JUSTICE OF THE PEACE/NOTARY PUBLIC

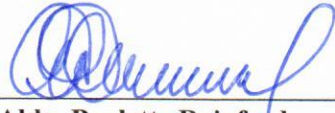


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BOND OF SURETY

I, Abby Paulette Rainford of P.O. Box 10704 APO, Grand Cayman KY1-1006, Cayman Islands, declare myself to be bound unto the Minister of Finance of the Cayman Islands in the sum of CI\$3,832,000.00 payment thereof to be enforced against me by due process of law if the Applicant herein fails to comply with the condition set out in the bond above.

Signed sealed and delivered by the said


Abby Paulette Rainford

In the presence of


JUSTICE OF THE PEACE/ NOTARY PUBLIC

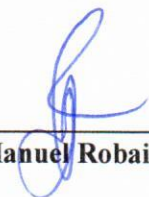


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BOND OF SURETY

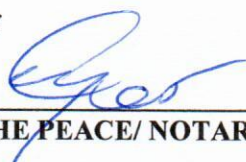
I, **Jose Manuel Robaina Rico II** of P.O. Box 1630 Sav, Grand Cayman KY1-1504, Cayman Islands, declare myself to be bound unto the Minister of Finance of the Cayman Islands in the sum of CI\$3,832,000.00 payment thereof to be enforced against me by due process of law if the Applicant herein fails to comply with the condition set out in the bond above.

Signed sealed and delivered by the said



Jose Manuel Robaina Rico II

In the presence of



JUSTICE OF THE PEACE/ NOTARY PUBLIC



This Application is filed by Waide DaCosta, Attorney-at-Law, Unit #1, Eucalyptus Building, Shedden Road, George Town, P.O. Box 591, Grand Cayman KY1-1502, CAYMAN ISLANDS.

**CAYMAN ISLANDS
DEATH REGISTRATION FORM**

No.: 2021GT02240167

DEATH IN THE DISTRICT OF: **East End**

Place of Death:

Usual Residence of Deceased:

Health City, East End, Grand Cayman

100 Rankin Drive, George Town, Grand Cayman, Cayman Islands

Particulars of Deceased

Cause of Death

Date of Death: **15 November 2021**
 Full Name: **Lucille Juanita Rabaino Rico**
 Sex: **Female** Condition: **Divorced**
 Age: **62** Years **2** Months **2** Days
 Occupation or Calling: **Self Employed**
 Birthplace: **Cayman Islands**

I (a) **Acute Pulmonary Thromboembolism**
 (b) due to **Peritonitis with septicemia**
 (c) due to **COVID-19 pneumonia**
 II (Contributory) **Recurrent metastatic lobular breast (right) cancer with metastasis**

Certified by: **Dr. Khandare Pravin**
 Qualification: **Junior Consultant Medical Oncology**

Informant

Name: **Abby Rainford**

Residence: **P.O. Box 1630, Grand Cayman KY1-1109, Cayman Islands**

Relationship to Deceased: **Daughter**

Registrar's Certificate

Signed in my presence by the said informant
 (or)

Entered by me from the particulars of a certificate received from (Witness)

Date **17 November 2021**

Dr. Khandare Pravin

Signed

Cindy B. McField-Diaz Garcia
 REGISTRAR

