| FORM 2  |   |  |  |
|---|---|--|--|
| NOTICE OF INTENTION TO APPLY FOR GRANT OR RESEAL OF |   |  |  |
| A GRANT   |   |  |  |
| Rule 33   |   |  |  |
| IN THE SUPREME COURT OF TASMANIA                    |   |  |  |
| PROBATE REGISTRY                                    |   |  |  |
|   |   |  |  |
| In the matter of the Estate of:                     | MARGARET JOY HUGHES                         |  |  |
| Date of death:                                      | 16/01/2024                                  |  |  |
| Last known residential address of deceased:         | Snug Village Snug Tasmania                  |  |  |
| Address in Will:                                    | 6 Lorikett Street Kingston Tasmania         |  |  |
| Date of Will:                                       | 22/12/2016                                  |  |  |
| Executor named in Will:                             | PENELOPE KATHLEEN HUGHES                    |  |  |
| Full name of applicant:                             | PENELOPE KATHLEEN HUGHES                    |  |  |
| Address of applicant:                               | 5 Garnett Street Blackmans Bay              |  |  |
| Relationship of applicant to deceased:              | daughter                                    |  |  |
| Australian legal practitioner acting for applicant: | Simmons Wolfhagen Lawyers                   |  |  |
| Address for service:                                | Level 4, 99 Bathurst Street Hobart Tasmania |  |  |

## TAKE NOTE:

After 14 days from the date of publication of this notice an application for a grant of:

probate of the Will dated 22/12/2016

in the aforementioned estate will be made to the Probate Registry of the Supreme Court of Tasmania.

| Estate of:           | Margaret Joy Hughes         | DX:           | N/A                              |
|----------------------|-----------------------------|---------------|----------------------------------|
| Applicant/Firm name: | Simmons Wolfhagen           | Tel:          | 03 6226 1200                     |
| Address:             | Level 4, 99 Bathurst Street | Email:        | michelle.reinmuth@simwolf.com.au |
|                      | Hobart Tas 7000             | Practitioner: | M B Reinmuth                     |