

OFFICE of VITAL STATISTICS

CERTIFIED COPY

CERTIFICATE OF DEATH
FLORIDA

1. DECEDENT'S NAME FIRST: ROSALIND MIDDLE: LAST: DISKIN		2. SEX FEMALE	
3. DATE OF DEATH (Month, Day, Year) Found: October 22, 1996		4. SOCIAL SECURITY NUMBER 3718	
5. DATE OF BIRTH (Month, Day, Year) SEPTEMBER 6, 1921		6. AGE - Last Birthday (years) 75	
7. BIRTHPLACE (City and State or Foreign Country) BRONX, NEW YORK		8. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes or No) NO	
9. PLACE OF DEATH (Check only one: see instructions on other side) HOSPITAL: <input type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> DOA <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> Residence <input type="checkbox"/> Other (Specify)		10. INSIDE CITY LIMITS? (Yes or No) YES	
11. FACILITY NAME (If not institution, give street and number) 3525 Magellan Circle #621		12. CITY, TOWN, OR LOCATION OF DEATH AVENTURA	
13. COUNTY OF DEATH DADE		14. DECEDENT'S USUAL OCCUPATION DESIGNER	
15. KIND OF BUSINESS/INDUSTRY INTERIOR		16. MARITAL STATUS—Married, Never Married, Widowed, Divorced (Specify) MARRIED	
17. SURVIVING SPOUSE (If wife, give maiden name) SIMON DISKIN		18. RESIDENCE—STATE FLORIDA	
19. COUNTY DADE		20. CITY, TOWN, OR LOCATION AVENTURA	
21. STREET AND NUMBER 3525 MAGELLAN CIRCLE #621		22. INSIDE CITY LIMITS? (Yes or No) YES	
23. ZIP CODE 33180		24. WAS DECEDENT OF HISPANIC OR HAITIAN ORIGIN? (Specify No or Yes - If yes, specify Mexican, Cuban, Mexican, Puerto Rican, etc.) No	
25. RACE - American Indian, Black, White, etc. Specify: WHITE		26. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary College (1 - 4 or 5+) (10 - 12) UNKNOWN	
27. FATHER'S NAME (First, Middle, Last) HARRY GOLDBERG		28. MOTHER'S NAME (First, Middle, Maiden Surname) MOLLIE GREENBERG	
29. INFORMANT'S NAME (Type/Print) SIMON DISKIN		30. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) 3525 MAGELLAN CIRCLE #621 AVENTURA, FL 33180	
31. METHOD OF DISPOSITION <input type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal from State <input checked="" type="checkbox"/> Other (Specify) ENTOMBMENT		32. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) BETH DAVID CEMETERY	
33. LOCATION—City or Town, State HOLLYWOOD, FLORIDA		34. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH Michael C. Blasberg	
35. LICENSE NUMBER (of Licensee) 2084		36. NAME AND ADDRESS OF FACILITY BLASBERG RUBIN/ ZILBERT MEMORIAL CHAPEL 720 71st STREET MIAMI BEACH, FL 33141	
37. To be Completed by CERTIFYING PHYSICIAN Only 22a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) as stated. (Signature and Title) <i>Michael Bell</i>		38. To be Completed by MEDICAL EXAMINER 23a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) as stated. (Signature and Title) <i>Michael Bell</i>	
22b. DATE SIGNED (Mo., Day, Yr.)		23b. DATE SIGNED (Mo., Day, Yr.) October 23, 1996	
22c. HOUR OF DEATH		23c. HOUR OF DEATH Found: 1:15 P.M.	
22d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		23d. MEDICAL EXAMINER CASE # 9 6 1 1 0 2 7 4 4	
39. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, MEDICAL EXAMINER) (Type or Print) MICHAEL D. BELL, M.D. MEDICAL EXAMINER DEPARTMENT NUMBER ONE ON BOB HOPE ROAD MIAMI, FLORIDA 33136			
40. STATE REGISTRAR—SIGNATURE AND DATE <i>Joyce Kenney 10-25-96</i>		41. LOCAL REGISTRAR—SIGNATURE <i>Maurice Darden</i>	
42. DATE REGISTERED OCT 29 1996		43. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. IMMEDIATE CAUSE (Final disease or condition resulting in death) → Atherosclerotic Heart Disease DUE TO (OR AS A CONSEQUENCE OF): Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST. DUE TO (OR AS A CONSEQUENCE OF): DUE TO (OR AS A CONSEQUENCE OF): DUE TO (OR AS A CONSEQUENCE OF):	
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.		44. WAS AN AUTOPSY PERFORMED? (Yes or No) No	
45. WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? (Yes or No)		46. CASE REPORTED TO MEDICAL EXAMINER? (Yes or No) Yes	
47. IF FEMALE, WAS THERE A PREGNANCY IN THE PAST 3 MONTHS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		48. IF SURGERY IS MENTIONED IN PART I OR II ENTER CONDITION FOR WHICH IT WAS PERFORMED	
49. DATE OF SURGERY (Mo., Day, Year)		50. PROBABLE MANNER OF DEATH: (Specify) Natural, accident, suicide, homicide, or undetermined.	
51. DATE OF INJURY (Month, Day, Year)		52. TIME OF INJURY M	
53. INJURY AT WORK? (Yes or No)		54. DESCRIBE HOW INJURY OCCURRED	
55. PLACE OF INJURY—At home, farm, street, factory, etc. (Specify)		56. LOCATION (Street and Number or Rural Route Number, City or Town, State)	

THIS IS A CERTIFIED TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE

Maurice Darden

OCT 30 1996

State Registrar

WARNING:

DO NOT ACCEPT CERTIFIED COPIES UNLESS ON SECURITY PAPER WITH COLORED BACKGROUND AND THE LETTERS FLA IN THE UPPER RIGHT AND LEFT CORNERS OF PAPER ON FRONT AND VERTICAL SECURITY LINES ON BACK. UNAUTHORIZED ALTERATION OR ERASURE VOIDS THIS CERTIFICATE.

8080134

HRS FORM 1564 (10/95)



DEPARTMENT OF HEALTH AND HUMAN SERVICES

0477609
(BK 999 PG5327)
BK0999PG5327



A TIMESHARE ESTATE COMPRISED OF:

PARCEL ONE

An undivided 1/51st interest in and to that certain condominium as follows:

- (A) An undivided 1/106th interest as tenants-in-common, in and to Lot 37 as shown on Tahoe Village Unit No. 3-10th Amended Map, Recorded September 21, 1990 as Document No. 235008, Official Records of Douglas County, State of Nevada. Except therefrom Units 039 through 080 (inclusive) and Units 141 through 204 (Inclusive) as shown and defined on that certain Condominium Plan recorded as Document No. 182057, Official Records of Douglas County, State of Nevada.
- (B) Unit No. 169 as shown and defined on said last Condominium Plan.

PARCEL TWO

- (A) a non-exclusive easement for roadway and public utility purposes as granted to Harich Tahoe developments in deed re-recorded December 8, 1981, as Document No. 63026, being over a portion of Parcel 26-A (described in Document No. 01112, recorded June 17, 1976) in Section 30, Township 13 North, Range 19 East M.D.B. & M.; and
- (B) An easement for ingress, egress and public utility purposes, 32' wide, the centerline of which is shown and described on the Seventh Amended Map of Tahoe Village No. 3, recorded April 9, 1986, as Document No. 133178 of Official Records, Douglas County, State of Nevada.

PARCEL THREE

A non-exclusive right to use the real property known as "Common Area" as shown on Tahoe Village Unit No. 3-10th Amended Map, Recorded September 21, 1990 as Document No. 235008 of the Douglas County Recorder's Office, Douglas County, Nevada, within Section 30, Township 13 North, range 19 East, M.D.B. & M. for all those purposes provided for in the Declaration of Covenants, Conditions, and Restrictions recorded January 11, 1973, as Document No. 63681, in book 173 Page 229 of Official Records and in modifications thereof: (1) recorded September 28, 1973, as Document No. 69063 in Book 973 Page 812 of Official Records; (2) recorded July 2, 1976, as Document No. 1472 in Book 776 Page 87 of Official Records; and (3) recorded July 26, 1989, as Document No. 207446, in Book 789, Page 3011.

PARCEL FOUR

A non-exclusive easement for ingress and egress and recreational purposes and for the use and enjoyment and incidental purposes over, on and through Lots 29, 30, 35, 39, 40, and 41 as shown on Tahoe Village Unit No. 3 - 10th Amended Map, Recorded September 21, 1990 as Document No. 235008 of the Douglas County Recorder's Office, Douglas County, Nevada, within Section 30, Township 13 North, Range 19 East M.D.B. & M. for all those purposes provided for in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions, recorded February 14, 1984, as Document No. 96758 and as amended from time to time of Official Records of Douglas County, State of Nevada.

PARCEL FIVE

The Exclusive right to use any UNIT of the same Unit Type as described in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded August 18, 1988, as Document No. 184461 of Official Records of Douglas the Douglas County, in which an interest is hereby conveyed in subparagraph (B) of Parcel One, and the non-exclusive right to use the real property referred to in subparagraph (A) of Parcel One and Parcels Two, Three and Four above for all of the purposes provided for in the Fourth Amended and Restated Declaration of covenants, Conditions and Restrictions of the Ridge Tahoe, recorded February 14, 1984, as Document No. 96758 of Official Records of Douglas County, during ONE use week within the PRIME season, as said quoted term is defined in the Declaration of Annexation of The Ridge Tahoe Phase Five.

The above described exclusive right may be applied to any available unit of the same Unit Type on Lot 37 during said use week within said "use season".

A Portion of APN 42-286-11

REQUESTED BY
STEWART TITLE of DOUGLAS COUNTY
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

1999 SEP 28 AM 10:12

LINDA SLATER
RECORDER

\$9.00 PAID K2 DEPUTY

0477609

BK0999PG5328