

RECORDING REQUESTED BY:
Anderson & Dorn, Ltd.
294 East Moana Lane, Ste, B27
Reno, NV 89502

WHEN RECORDED MAIL TO:
HOWARD A. WYSATTA
1088 WISTERIA DRIVE
MINDEN NV 89423

AFFIDAVIT OF SUCCESSOR TRUSTEE

I, HOWARD A. WYSATTA, the undersigned, affirm under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

- (1) By instrument dated January 21, 1998, VIRGINIA A. WYSATTA and I executed the Wysatta Living Trust ("Trust").
- (2) Said trust appointed me to serve as sole Successor Trustee upon the death of VIRGINIA A. WYSATTA.
- (3) VIRGINIA A. WYSATTA died on April 29, 1999, at Carson City, Nevada, a resident of Douglas County, Nevada. Attached hereto as Exhibit "A" is a certified copy of the death certificate of said VIRGINIA A. WYSATTA.
- (4) Pursuant to the terms of the Trust, I have assumed the responsibilities of sole Successor Trustee.
- (5) The following described real property is part of the trust estate: See Exhibit "B" attached.
- (6) I am authorized under the terms of the Trust and applicable provisions of the Nevada Revised Statutes to act as the Successor Trustee with respect to the trust's interest in the described property.
- (7) No other person has a right to the interest of the Trust in the described property.
- (8) The described property shall be transferred to me as Successor Trustee.

Executed on MAR 2 2000, at Reno, Nevada.

Howard A. Wysatta

 HOWARD A. WYSATTA,
 Successor Trustee

STATE OF NEVADA)
 ss:
 COUNTY OF WASHOE)

On March 2, 2000 date, before me, Rebecca L. Butler, personally appeared Howard A. Wysatta, personally known to me or proven to me upon the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person or persons acted, executed the instrument.

WITNESS my hand and official seal.
Rebecca L. Butler
Signature of Notary



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STATE OF NEVADA

DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH VITAL STATISTICS STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH — SECTION OF VITAL STATISTICS CERTIFICATE OF DEATH

99 005370

TYPE OR PRINT IN PERMANENT BLACK INK.

DECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

DISPOSITION

CERTIFIER

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

CAUSE OF DEATH

LOCAL FILE NUMBER		DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)	COUNTY OF DEATH				
1. Virginia A. WYSATTA		2. April 29, 1999		3a. Carson City					
CITY, TOWN OR LOCATION OF DEATH		HOSPITAL OR OTHER INSTITUTION—Name (if not either, give street and number)		If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify)	SEX				
3b. Carson City		3c. Nevada Cares		3e. Inpatient 5	4. Female				
RACE—(e.g., White, Black, American Indian, etc.) (Specify)		Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc.		AGE—Last Birthday (Years)	UNDER 1 YEAR MOS : DAYS	UNDER 1 DAY HOURS : MINS	DATE OF BIRTH (Mo., Day, Yr.)		
5. White		6. X		7a. 75	7b. :	7c. :	8. August 13, 1923		
STATE OF BIRTH (If not U.S.A., name country)		CITIZEN OF WHAT COUNTRY		Decedent's Education. Specify highest grade completed.		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)		SURVIVING SPOUSE (If wife, give maiden name)	
9a. Colorado		9b. U.S.A.		10. 13		11. Married		12. Howard A. Wysatta	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired)		KIND OF BUSINESS OR INDUSTRY					
13. [REDACTED] 9800		14a. Homemaker		914 961		14b. Own Home			
RESIDENCE STATE		COUNTY		CITY, TOWN, OR LOCATION		STREET AND NUMBER		INSIDE CITY LIMITS (Specify Yes or No)	
15a. Nevada		15b. Douglas		15c. Minden		15d. 1088 Wisteria Dr.		15e. Yes	
FATHER—NAME First Middle Last				MOTHER—MAIDEN NAME First Middle Last					
16. James Leasure				17. Virginia Slade					
INFORMANT—NAME (Type or Print)				MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)					
18a. Howard A. Wysatta - Husband				18b. 1088 Wisteria Drive, Minden, Nevada 89423					
BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION City or Town State					
19a. Burial		19b. Eastside Memorial Park		19c. Minden, Nevada					
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY					
20a. Jimmy Bumsen		20b. 9		20c. 1478 Fourth Street, Minden, Nevada 89423 53					
21. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.		22a. 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) and manner stated.							
To be completed by CERTIFYING PHYSICIAN		To be completed by Coroner's Office							
21a. (Signature and Title) Audrea K. Weed MD		22a. (Signature and Title)		DATE SIGNED (Mo., Day, Yr.)		HOUR OF DEATH			
21b. 4/30/99		21c. 2030		22b. PRONOUNCED DEAD (Mo., Day, Yr.)		22c. PRONOUNCED DEAD (Hour)			
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22d. ON		22e. AT					
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print)						LICENSE NUMBER			
23a. Dr. A. Weed, 1540 Hwy. 395, Gardnerville, Nevada 89410						23b. D0675			
REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)		DEATH DUE TO COMMUNICABLE DISEASE					
24a. (Signature) [Signature]		24b. May 3, 1999		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
25. IMMEDIATE CAUSE PART I		ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).		Interval between onset and death					
(a) Cardiopulmonary arrest		DUE TO, OR AS A CONSEQUENCE OF:		minutes					
(b) Shy Dragers Syndrome		DUE TO, OR AS A CONSEQUENCE OF:		years					
(c) Pheochromocytoma		DUE TO, OR AS A CONSEQUENCE OF:		years					
PART II OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.		AUTOPSY (Specify Yes or No)		WAS CASE REFERRED TO CORONER (Specify Yes or No)					
26. No		27. Yes							
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)		HOUR OF INJURY		DESCRIBE HOW INJURY OCCURRED			
28a.		28b.		28c. M		28d.			
INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)		LOCATION.		STREET OR R.F.D. No.		CITY OR TOWN STATE	
28e.		28f.		28g.					

STATE REGISTRAR

No. 145221

Gwonne Sylva

This is to certify that the above is a true and correct copy of the certificate on file in this office.

Date Issued:

JAN 20 2000

0489129

State Registrar

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

EXHIBIT A BK 0300 PG 6203

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RECORDING REQUESTED BY)
✓ BRADLEY B ANDERSON & ASSOCIATES)
Attorneys and Counselors at Law)
294 East Moana Lane, Suite B27)
Reno, NV 89502)

WHEN RECORDED MAIL TO:)
Same as Above)

MAIL TAX STATEMENTS TO:)
HOWARD A. WYSATTA and)
VIRGINIA A. WYSATTA)
1088 Wisteria Drive)
Minden, Nevada 89423)

GRANTEES:
HOWARD A. WYSATTA
VIRGINIA A. WYSATTA
1088 Wisteria Drive
Minden, Nevada 89423

Warranty Deed

APN: 25-661-01
1088 Wisteria Drive, Minden

R.P.T.T. \$ # 8

For no consideration, HOWARD A. WYSATTA and VIRGINIA A. WYSATTA of 1088 Wisteria Drive, City of Minden, County of Douglas, State of Nevada, ("Grantors") hereby grant, bargain and assign unto: HOWARD A. WYSATTA and VIRGINIA A. WYSATTA, Trustees, or their successors in trust, under the WYSATTA LIVING TRUST dated JAN 21 1998 and any amendments thereto, as described on that Certificate of Trust attached hereto as Exhibit A, ("Grantees"), to have and to hold as their community property, the real property located in the County of Douglas, State of Nevada, more particularly described on Exhibit B, attached hereto.

Together with all and singular the tenements, hereditaments, and appurtenances belonging to or in any manner appertaining to such property, and the reversion and reversions, remainder and remainders, rents, issues, and profits of such property.

To have and to hold all and singular the described property, together with the appurtenances, to Grantees, and to Grantees' heirs and assigns forever. Grantors warrant, for Grantors, Grantors' heirs, executors, and administrators, that Grantors have not conveyed the described property, or any right, title, or interest in such property, to any person other than Grantees, and that the described property is free from encumbrances, done, made, or suffered by Grantors, or any person claiming under Grantors.

The Grantors and Grantors' heirs, executors, and administrators, will and shall warrant and defend the described property conveyed and the appurtenances appertaining to such property to Grantees, Grantees' heirs, and assigns, against the lawful claims of any and all person and persons whomsoever.

In witness whereof, Grantors have set Grantors' hand on the day and year first written above.

Date: JAN 21 1998

Howard A. Wysatta
HOWARD A. WYSATTA
Virginia A. Wysatta
VIRGINIA A. WYSATTA

STATE OF NEVADA)
SS)
COUNTY OF WASHOE)

On JAN 21 1998, before me, a Notary Public in and for said State, personally appeared HOWARD A. WYSATTA and VIRGINIA A. WYSATTA, personally known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

Witness my hand and official seal.

Patricia A. Holt
Notary Public

PATRICIA A. HOLT
NOTARY PUBLIC
STATE OF NEVADA
WASHOE COUNTY
My Appt. Expires July 23, 2000

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Certificate of Trust

The undersigned Trustors and Trustees hereby certify the following:

1. This Certificate of Trust refers to the WYSATTA LIVING TRUST dated JAN 21 1998 under a revocable trust agreement executed on JAN 21 1998 by HOWARD A. WYSATTA and VIRGINIA A. WYSATTA as Trustors.
2. The address of the Trustors is 1088 Wisteria Drive, Minden, Nevada 89423.
3. Title to assets may be taken in the formal name: HOWARD A. WYSATTA and VIRGINIA A. WYSATTA, Trustees, or their successors in trust, under the WYSATTA LIVING TRUST dated JAN 21 1998 and any amendments thereto.
4. The initial Trustees of the Trust are:

HOWARD A. WYSATTA
VIRGINIA A. WYSATTA
5. The present Trustees are:

HOWARD A. WYSATTA
VIRGINIA A. WYSATTA
6. The successor incapacity and death Trustee(s) for HOWARD A. WYSATTA are:

VIRGINIA A. WYSATTA
MYRON G. BATES
NANCY PINK
7. The successor incapacity and death Trustee(s) for VIRGINIA A. WYSATTA are:

HOWARD A. WYSATTA
MYRON G. BATES
NANCY PINK
8. Unless otherwise provided in the trust agreement, when either one of us is serving as Trustee under the trust, that Trustee may conduct business and act on behalf of the trust without the consent of any other Trustees.
9. The Trustees under the trust agreement are authorized to acquire, sell, convey, encumber, lease, borrow, manage and otherwise deal with interests in real and personal property in trust name. All powers of the Trustees are fully set forth in Article Fourteen of the trust agreement.

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10. This trust is a revocable trust and either Trustor has the power to revoke it.
11. The trust has not been revoked and there have been no amendments limiting the powers of the Trustees over trust property.
12. There is no identifying number for the Trust other than the Trustors' social security numbers.
13. No person or entity paying money to or delivering property to any Trustee shall be required to see to its application. All persons relying on this document regarding the Trustees and their powers over trust property shall be held harmless for any resulting loss or liability from such reliance. A copy of this Certificate of Trust shall be just as valid as the original.

The undersigned certify that the statements in this Certificate of Trust are true and correct and that it was executed in the County of Washoe, Nevada on JAN 21 1998.

Trustors:

Howard A. Wysatta
HOWARD A. WYSATTA

Virginia A. Wysatta
VIRGINIA A. WYSATTA

Trustees:

Howard A. Wysatta
HOWARD A. WYSATTA

Virginia A. Wysatta
VIRGINIA A. WYSATTA

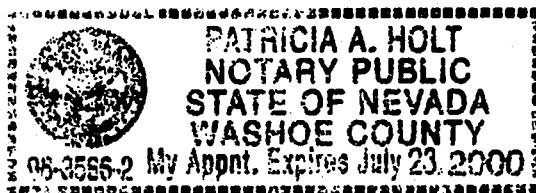
STATE OF NEVADA)
COUNTY OF WASHOE) SS

This instrument was acknowledged before me on JAN 21 1998 by HOWARD A. WYSATTA and VIRGINIA A. WYSATTA, Trustors and Trustees.

Patricia A. Holt
Notary Public

My Commission Expires: _____

Prepared by:
Bradley B Anderson
Bradley B Anderson and Associates
Attorneys and Counselors at Law
294 East Moana Lane, Suite B27
Reno, NV 89502-4634
(702) 823-9455 FAX (702) 823-9456



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**Exhibit B
Warranty Deed**

1088 Wisteria Drive, Minden, NV 89423

Legal Description:

Lot 56 in Block D as shown on the Official Plat of Winhaven Unit No. 2, Phase A, filed for record in the office of the County Recorder on September 14, 1990 in Book 990 of Official Records, at Page 1934, Douglas County, State of Nevada, as Document No. 234654.

COPY

REQUESTED BY
Bradley B. Anderson
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'98 JAN 27 10:14

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NOV 10 1998

LINDA SLATER
RECORDER
\$10 PAID ka DEPUTY

COPY

REQUESTED BY
No American Deed Co
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2000 MAR 31 PM 2:08

LINDA SLATER
RECORDER

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