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THOMPSON MORELLO
PROFESSIONAL CORPORATION
ATTORNEYS AND COUNSELORS AT LAW
1800 BIDDLE AVENUE
WYANDOTTE, MICHIGAN 48192

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

QUIT CLAIM DEED Statutory Form for Individuals

QUIT CLAIM DEED

The Grantor(s) NEOMA G. GOODMAN, survivor of herself and WALTER GOODMAN, whose death certificate is hereto attached whose address is: 18352 Hampton Ct., Livonia, Michigan 48152

Quit claim(s) to: NEOMA G. GOODMAN, as Trustee of the NEOMA G. GOODMAN Revocable Living Trust dated August 15, A.D., 2000

whose address is: 18352 Hampton Ct., Livonia, Michigan 48152

Land in the ~~XXXXXXXXXXXXXXXX~~ of N/A, County of Douglas, State of ~~XXXXXX~~ more fully described as:

Nevada

SEE "EXHIBIT A" ATTACHED HERETO AND INCORPORATED HEREIN BY REFERENCE

Commonly known as: N/A
Tax Identification Number: PTN 42-010-32

For the sum of: \$1.00; exempt from transfer tax pursuant to MCLA 207.505(a) and MCLA 207.526.

Dated: August 15, 2000

Signed and Delivered in the Presence of:

Signed:

Gerald M. Morello, Jr.
GERALD M. MORELLO, JR.

Neoma G. Goodman
NEOMA G. GOODMAN

David W. Van Hoof
DAVID W. VAN HOOF

THOMPSON MORELLO, P.C., ATTORNEYS AND COUNSELORS AT LAW

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THOMPSON MORELLO, P.C., ATTORNEYS AND COUNSELORS AT LAW

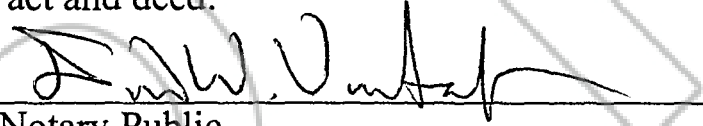
STATE OF MICHIGAN)

:SS

COUNTY OF WAYNE)

On this 15th day of August, 2000 before me, a Notary Public in and for said county, personally appeared NEOMA G. GOODMAN, to me known and known to me to be the persons described in and who executed the foregoing instrument and acknowledged to me that they executed the same as their own free act and deed.

DAVID W. VAN HOOF
Notary Public, Jackson County, Michigan
My Commission Expires November 28, 2003
Acting in WAYNE


Notary Public

Instrument drafted by: **THOMPSON MORELLO, P.C.**, DAVID W. VAN HOOF P47718,
1800 BIDDLE AVENUE, WYANDOTTE, MI 48192

Send subsequent tax bills to: 18352 Hampton Ct., Livonia, MI 48152

Tax Parcel # PTN 42-010-3

Recording Fee: \$

Transfer Tax: Exempt

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LF 000545
CF 7



STATE OF MICHIGAN
DEPARTMENT OF COMMUNITY HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER
1706838

TYPE/PRINT
IN
PERMANENT
BLACK INK

NAME OF DECEDENT
FOR USE BY PHYSICIAN OR INSTITUTION

1 DECEDENT'S NAME (First, Middle, Last) WALTER GOODMAN				2 SEX Male		3 DATE OF DEATH (Month, Day, Year) June 8, 2000	
4a AGE - Last Birthday (Years) 79		4b UNDER 1 YEAR MONTHS DAYS		4c UNDER 1 DAY HOURS MINUTES		5 DATE OF BIRTH (Month, Day, Year) July 10, 1920	
6 COUNTY OF DEATH Wayne						7a LOCATION OF DEATH (Enter place officially pronounced dead in 7a, 7b, 7c.) HOSPITAL OR OTHER INSTITUTION - Name (If not in either, give street and number) 18352 Hampton Ct.	
7b IF HOSP OR INST inpatient, Op / Emer Room, DOA (Specify) ---						7c CITY, VILLAGE, OR TOWNSHIP OF DEATH Livonia	
8 SOCIAL SECURITY NUMBER ██████-2365			9a USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired) Appraiser			9b KIND OF BUSINESS OR INDUSTRY Real Estate	
10a CURRENT RESIDENCE - STATE Michigan		10b COUNTY Wayne		10c LOCALITY (Check one box and specify) <input checked="" type="checkbox"/> INSIDE CITY OR VILLAGE OF <input type="checkbox"/> TWP. OF Livonia		10d STREET AND NUMBER 18352 Hampton Ct.	
10e ZIP CODE 48152		11 BIRTHPLACE (City and State or Foreign Country) Scotland		12 MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) Married		13 SURVIVING SPOUSE (If wife, give name before first married) Neoma Lavender	
14 WAS DECEDENT EVER IN U.S. ARMED FORCES? (Specify Yes or No) Yes				15 ANCESTRY - Mexican, Puerto Rican, Cuban, Central or South American, Chicano, other Hispanic, Afro-American, Arab, English, French, Finnish, etc. (Specify below) Scottish			
16 RACE - American Indian, Black, White, etc. If Asian, give nationality i.e. Chinese, Filipino, Asian Indian, etc. (Specify below) White				17 DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) 12 College (1-4 or 5+) 			
18 FATHER'S NAME (First, Middle, Last) John Goodman				19 MOTHER'S NAME (First, Middle, Surname before first married) Annie Strachan			
20a INFORMANT'S NAME (Type/Print) Neoma Goodman				20b MAILING ADDRESS (Street and Number or Rural Route Number, City or Village, State, ZIP Code) 18352 Hampton Ct., Livonia, Michigan 48152			
21 METHOD OF DISPOSITION - Burial, Cremation, Removal, Donation, Other (specify) Cremation			22a PLACE OF DISPOSITION (Name of Cemetery, Crematory, or other place) CSM Cremation Services			22b LOCATION - City or Village, State Canton, Michigan	
23 SIGNATURE OF FUNERAL SERVICE LICENSEE <i>David A. Cook</i>			24 LICENSE NUMBER (of Licensee) 6075		25 NAME AND ADDRESS OF FACILITY R.G. & G.R. Harris Funeral Home 15451 Farmington Rd., Livonia, MI 48154		
26 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) a CARDIAC ARRHYTHEMIA DUE TO (OR AS A CONSEQUENCE OF) b ARTERIO SCLEROTIC HEART DISEASE DUE TO (OR AS A CONSEQUENCE OF) c _____ DUE TO (OR AS A CONSEQUENCE OF) d _____ Approximate Interval Between Onset and Death 1 HOUR 10 YEARS							
PART II Other significant conditions contributing to death but not resulting in the underlying cause given in Part I Old Myocardial INFARCTION L.V. DYSFUNCTION							
27a WAS AN AUTOPSY PERFORMED? (Yes or No) No			27b WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (Yes or No)				
28 ACTUAL PLACE OF DEATH (Home, Nursing Home, Hospital, Ambulance) (Specify) Residence			29 WAS CASE REFERRED TO MEDICAL EXAMINER? (Specify Yes or No) No			31a (Check one only) <input type="checkbox"/> The case reviewed and determined not to be a medical examiner's case <input type="checkbox"/> On the basis of examination and of investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated.	
30a To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) <i>Dhupati Sitaram</i>		30b DATE SIGNED (Mo., Day, Yr.) June 9, 2000		30c TIME OF DEATH 7:45 P. M		31b DATE SIGNED (Mo., Day, Yr.)	
30d NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		31c CASE NUMBER		31d PRONOUNCED DEAD (Mo., Day, Yr.) ON		31e TIME OF DEATH M	
32a NAME AND ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (ITEM 26) (Type or Print) DHUPATI SITARAM, 20315 FARMINGTON RD BLD D, LIVONIA MI 48152							
32b LICENSE NUMBER 37731							
33a ACC SUICIDE, HOM., NATURAL OR PENDING INVEST. (Specify)		33b DATE OF INJURY (Mo., Day, Yr.)		33c TIME OF INJURY M		33d DESCRIBE HOW INJURY OCCURRED	
33e INJURY AT WORK (Specify Yes or No)		33f PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)		33g LOCATION - Street or RFD No City, Village or Twp State			
34a REGISTRAR'S SIGNATURE <i>Joan McCotter</i>				34b DATE FILED (Month, Day, Year) June 12, 2000			

DCH - 0483 10/98
(Formerly B-36)

CERTIFICATION

I HEREBY CERTIFY THAT THIS IS A TRUE COPY OF A DEATH CERTIFICATE ON FILE
IN MY OFFICE.

Joan McCotter
JOAN MCCOTTER, CITY CLERK
City of Livonia, Wayne County
DATE JUN 12 2000

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BK 1100PG0370

SEAL

EXHIBIT A TO QUIT CLAIM DEED
DATED AUGUST 15, 2000

A TIMESHARE ESTATE COMPRISED OF:

PARCEL ONE:

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

- (A) An undivided 1/106ths interest as tenants-in-common, in and to Lot 37 of Tahoe Village Unit No. 3 as shown on the Ninth Amended Map Recorded July 14, 1988 as Document No. 182057, 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, Nevada.
- (B) Unit No. 039 as shown and defined on said Condominium Plan.

PARCEL TWO:

A non-exclusive right to use the real property known as Parcel "A" on the Official Map of Tahoe Village Unit No. 3, recorded January 22, 1973, as Document No. 63805, records of said county and state, 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 the modifications thereof recorded September 28, 1973 as Document No. 69063 in Book 973, Page 812 of Official Records and recorded July 2, 1976 as Document No. 1472 in Book 776, Page 87 of Official Records.

PARCEL THREE:

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, 39, 40, and 41 as shown on Tahoe Village Unit No. 3 - Seventh Amended Map, recorded April 9, 1986 as Document No. 133178 of Official Records of Douglas County, State of Nevada and such recreational areas as may become a part of said timeshare project, 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 of Official Records of Douglas County, State of Nevada.

PARCEL FOUR:

- (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, -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 FIVE:

The exclusive right to use a unit of the same Unit Type as described in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded on August 18, 1988, as Document No. 184461 of Official Records of 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 weeks within the SWING SEASON, as said quoted term is defined in the Declaration of Annexation of The Ridge Tahoe Phase Five.

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

REQUESTED BY
Thompson Morello
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2000 NOV -2 PM 3: 18

LINDA SLATER
RECORDER

\$ 11⁰⁰ PAID K2 DEPUTY

0502666

BK 1100P60372