

CERTIFICATE OF INCUMBENCY AND CERTIFICATION OF TRUST
N.R.S. 164.400

JOHN ROBERT LOEFFLER, being duly sworn, deposes and says:

1. That JOHN ROBERT LOEFFLER and NORMA JEAN LOEFFLER created a Revocable Living Trust on April 9, 1991, entitled THE JOHN ROBERT LOEFFLER AND NORMA JEAN LOEFFLER FAMILY TRUST.
2. That by the terms of said trust, JOHN ROBERT LOEFFLER and NORMA JEAN LOEFFLER were designated as Co-Trustees.
3. That NORMA JEAN LOEFFLER is now deceased. A certified copy of her Certificate of Death is attached hereto as "Exhibit A."
4. That JOHN ROBERT LOEFFLER is the remaining Trustee of THE JOHN ROBERT LOEFFLER AND NORMA JEAN LOEFFLER FAMILY TRUST.
5. That the form in which title to assets of the trust is to be taken is:
"JOHN ROBERT LOEFFLER, Successor Trustee of THE JOHN ROBERT LOEFFLER AND NORMA JEAN LOEFFLER FAMILY TRUST established April 9, 1991."
6. That the real property currently held in the trust includes: see Exhibit "B" attached hereto.
7. That the trust has not been revoked or amended so as to make any representations contained in this certification incorrect.
8. That the signature shown below is that of the currently acting Successor Trustee.
9. That this certificate is made pursuant to Section 164.400 of Nevada Revised Statutes.

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James M. O'Reilly, L.L.C.

3321 North Buffalo Drive, Suite 200, Las Vegas, Nevada 89101 (702) 477-7517

1492 Highway 395, Suite 106, Gardnerville, Nevada 89410 (775) 782-3647

0536275

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Signed this MARCH 5, 2002.

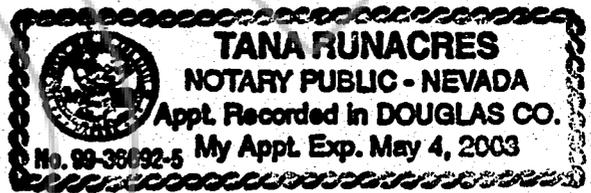
John Robert Loeffler
JOHN ROBERT LOEFFLER

STATE OF NEVADA)
 : SS
COUNTY OF DOUGLAS)

On this 5th day of March, 2002, before me, a Notary Public in and for said County and State, personally appeared JOHN ROBERT LOEFFLER who subscribed to the within instrument in my presence and who acknowledged to me that he executed the same.

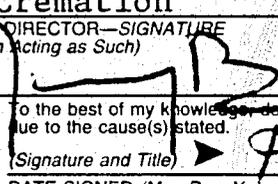
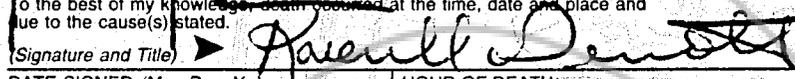
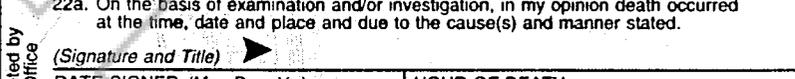
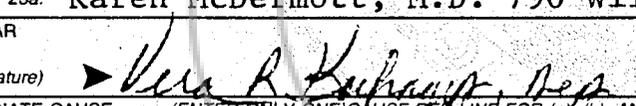
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

Tana Runacres
Notary Public



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

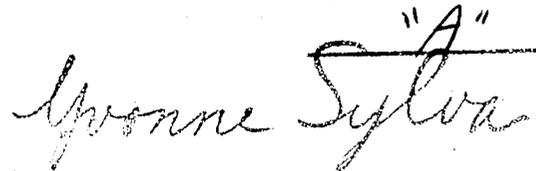
TYPE OR PRINT IN PERMANENT BLACK INK	LOCAL FILE NUMBER			STATE FILE NUMBER		
	DECEASED—NAME First Middle Last			DATE OF DEATH (Month, Day, Year)		
DECEDENT	1. Norma J. LOEFFLER			2. October 16, 2001		
	CITY, TOWN OR LOCATION OF DEATH			COUNTY OF DEATH		
3b. Gardnerville			3a. Douglas			
HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)			If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify)			
3c. 413 Lillian Court			3e. 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)		
5. White		6.		7a. 77		
UNDER 1 YEAR MOS : DAYS		UNDER 1 DAY HOURS : MINS		DATE OF BIRTH (Mo., Day, Yr.)		
7b. :		7c. :		8. October 19, 1923		
STATE OF BIRTH (If not U.S.A., name country)		CITIZEN OF WHAT COUNTRY		Decedent's Education. Specify highest grade completed.		
9a. Wisconsin		9b. U.S.A.		10. 16 yrs.		
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired)		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)		
13. 4857		14a. Homemaker		11. Married		
RESIDENCE—STATE		COUNTY		KIND OF BUSINESS OR INDUSTRY		
15a. Nevada		15b. Douglas		14b. Own Home		
CITY, TOWN, OR LOCATION		STREET AND NUMBER		INSIDE CITY LIMITS (Specify Yes or No)		
15c. Gardnerville		15d. 413 Lillian Crt.		15e. No		
PARENTS	FATHER—NAME First Middle Last			MOTHER—MAIDEN NAME First Middle Last		
	16. Clark Bradley			17. Inez Keiser		
INFORMANT—NAME (Type or Print)			MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)			
18a. John R. Loeffler			18b. 413 Lillian Court, Gardnerville, Nevada 89423			
DISPOSITION	BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME		LOCATION City or Town State	
	19a. Cremation		19b. Walton's Sierra Crematory		19c. Carson City, Nevada	
FUNERAL DIRECTOR—SIGNATURE (Or Person Acting as Such)		FUNERAL DIRECTOR LICENSE NUMBER		NAME AND ADDRESS OF FACILITY		
20a. 		20b. 9		20c. Walton's Douglas County Mortuary		
20c. 1478 Fourth Street, Minden, Nv. 89423		21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) 		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. (Signature and Title) 		
CERTIFIER	DATE SIGNED (Mo., Day, Yr.)		HOUR OF DEATH		DATE SIGNED (Mo., Day, Yr.)	
	21b. 10/16/01		21c. 0730		22b. :	
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		PRONOUNCED DEAD (Mo., Day, Yr.)		PRONOUNCED DEAD (Hour)		
21d.		22d. ON		22e. AT		
NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print.)			LICENSE NUMBER			
23a. Karen McDermott, M.D. 790 Willow St. Reno, NV 89502			23b. #6450			
CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST	REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)		DEATH DUE TO COMMUNICABLE DISEASE	
	24a. (Signature) 		24b. Oct. 16, 2001		24c. YES <input type="checkbox"/> NO <input type="checkbox"/>	
CAUSE OF DEATH	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					Interval between onset and death
	PART I (a) abdominal cancer DUE TO, OR AS A CONSEQUENCE OF:					Interval between onset and death
(b) DUE TO, OR AS A CONSEQUENCE OF:					Interval between onset and death	
(c) OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.					Interval between onset and death	
PART II		AUTOPSY (Specify Yes or No)		WAS CASE REFERRED TO CORONER (Specify Yes or No)		
26.		27.				
ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)		HOUR OF INJURY		
28a.		28b.		28c.		
INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)		DESCRIBE HOW INJURY OCCURRED		
28e.		28f.		28d.		
				28g.		



STATE REGISTRAR

No. 206908

EXHIBIT



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

Date Issued: **OCT 16 2001 0536275**

State Registrar

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

Exhibit "B"

• That real property commonly known as 413 Lillian Court, Gardnerville, situated in the County of Douglas, State of Nevada, more particularly bounded and described as follows:

Being a portion of the Northwest 1/4 of Section 23, Township 12, Range 19, M.D.B. & M., further described as:

Parcel 4-A of Parcel Map No. 2 for Lillian Ciarasso and Natale Ciarasso, filed for record in the office of the County Recorder of Douglas County, State of Nevada on December 19, 1986, in Book 1286, Page 2676, as Document No. 147127.

A.P.N. 1219-23-001-019

• That real property commonly known as 415 Lillian Court, Gardnerville, situated in the County of Douglas, State of Nevada, more particularly bounded and described as follows:

Being a portion of the Northwest 1/4 of Section 23, Township 12 North, Range 19 East, M.d.B. & M., further described as follows:

Parcel 3 of Parcel Map No. 1 for Lillian Ciarasso and Natale Ciarasso, filed for record in the office of the County Recorder of Douglas County, State of Nevada on October 23, 1984, in Book 1084, Page 2518, Document No. 109102 and by Certificate of Amendment recorded December 4, 1986, in Book 1286, Page 476, Document No. 146105.

A.P.N. 1219-23-001-020

• That real property commonly known as 257 Beverly Way, Gardnerville, situated in the County of Douglas, State of Nevada, more particularly bounded and described as follows:

Being all of Lot 13, as shown on the Map of FOOTHILL ACRES, recorded December 6, 1977, as Document No. 15619, Official Records of Douglas County, State of Nevada.

A.P.N. 1219-03-001-014

REQUESTED BY
James O'Reilly
IN OFFICIAL RECORDS OF
DOUGLAS CO. NEVADA

2002 MAR -5 PM 3: 22

LINDA SLATER
RECORDER

\$17⁰⁰ PAID *ka* DEPUTY

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