

APN: 1420-18-710-071
Recording requested by and mail documents
and tax statements, if applicable to:

Name: Vista Painting Svcs. Inc.

Address: 15 Glen Carran Circle

City/State/Zip: Sparks, Nv. 89431

Douglas County - NV
Werner Christen - Recorder
Page: 1 of 2 Fee: 15.00
BK-0308 PG- 2808 RPTT: 0.00



NOTICE OF LIEN

NOTICE IS HEREBY GIVEN:

1. That Vista Painting Svcs. Inc., hereinafter known as "Claimant", hereby claims a lien pursuant to the provisions of N.R.S. 108.221 to 108.246 inclusive, on property located in Douglas County of Nevada. (Set Forth legal description)

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Address: 955 Chip Creek Ct.

2. The amount of the original contract is \$ 40 -

3. The total amount of all changes and additions, if any, is \$ 0

4. The total amount of all payments received to date is \$ 0

5. The amount of the lien, after deducting all just credits and offsets is \$ 40 -

6. The name of the owner(s), if known, of the property is/are April P. McComb

7. The name of the person by whom the lien claimant was employed to whom the lien claimant furnished work, materials, or equipment is Syncon Homes Nv. Inc. / Sunridge Heights III, LLC

8. A brief statement of the terms of payment of the lien claimant's contract: Contracted to paint interior + exterior painting including warranty. Invoiced for completed work + have yet to be paid.

9. That the claim herein is entitles to a reasonable attorney's fee, statutory interest on the amount of this lien claim and costs incurred in perfecting this lien claim.

10. THIS FORM COMPLIES WITH NRS 108.226.

In Witness Whereof, I/We have hereunto set my/hand ours hands this 12th day of March, 2008.

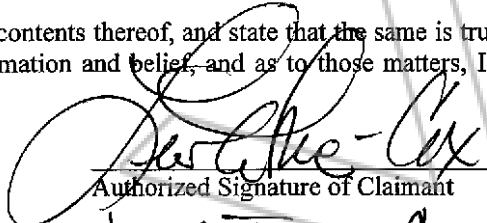
By: Lei A. Trease-Cox
Authorized Signature

Lei A. Trease-Cox
Claimant Name (Print)

STATE OF NEVADA)
COUNTY OF WASHOE)

I, **Lei A. Trease**, being first duly sworn on oath according to law, deposes and says:

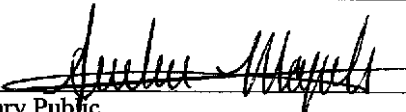
I have read the foregoing Notice of Lien claim, know the contents thereof, and state that the same is true of my own personal knowledge, except for those matters upon information and belief, and as to those matters, I believe them to be true.



Authorized Signature of Claimant

Lei A. Trease - Cox
Printed Name of Claimant

Subscribed and sworn to me this 13th day of March, 2008.



Notary Public

My Commission Expires: October 2, 2010

