

OFFICIAL RECORD

Requested By:

STEWART TITLE

A ptn of
A.P.N. # 1319-30-721-002
ESCROW NO. #31-082-32-02
RECORDING REQUESTED BY:
STEWART TITLE COMPANY

Douglas County - NV
Karen Ellison - Recorder
Page: 1 of 3 Fee: 16.00
BK-0509 PG- 260 RPTT: 0.00



WHEN RECORDED MAIL TO:

Maurice Carrillo
126 Pacheco Ave.
Santa Cruz, CA 95062

AFFIDAVIT - DEATH OF JOINT TENANT

STATE OF NEVADA }
 } ss
COUNTY OF Douglas }

MAURICE CARRILLO, of legal age, being first duly sworn, deposes
and says: That SARGE CARRILLO also known as SERGIA R. SORIA, the decedent mentioned in the attached
certified copy of Certificate of Death, is the same person as SARGE CARRILLO
named as one of the parties in that certain Grant Deed dated July 8, 1983 executed by
Harich Tahoe Development, a Nevada general partnership
Maurice Carrillo and Sarge Carrillo, husband and wife
as joint tenants, recorded as Instrument No. 87000 on September 16, 1983
in Book 983 Page 1244, of Official Records of Douglas
County, Nevada, covering the following described property situated in Douglas
County, State of Nevada:

See Exhibit 'A' attached hereto and by this reference made a part hereof.

DATE: Feb. 20, 2008

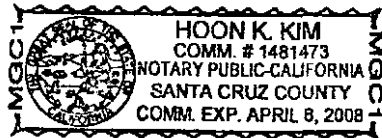
(Signature)
Maurice Carrillo

STATE OF CALIFORNIA }
 } ss.
COUNTY OF SANTA CRUZ }

This instrument was acknowledged before me on
Feb 20, 2008

by, MAURICE CARRILLO

Signature Hoon K. Kim
Notary Public



STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY of SANTA CRUZ
SANTA CRUZ, CALIFORNIA

CERTIFICATE OF DEATH

3-2000-44-000975

STATE FILE NUMBER _____ USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS _____ LOCAL REGISTRATION NUMBER

| | | | | | |
|--|--|--|--|---|--|
| 1. NAME OF DECEDENT—FIRST (GIVEN) SERGIA | | 2. MIDDLE R. | | 3. LAST (FAMILY) SORIA | |
| 4. DATE OF BIRTH M/M/DD/CCYY 05/06/1948 | | 5. AGE YRS. 52 | | 6. SEX fem | |
| 7. DATE OF DEATH M/M/DD/CCYY 07/31/2000 | | 8. HOUR 0145 | | 9. LOCAL REGISTRATION NUMBER 0145 | |
| 10. SOCIAL SECURITY NO. 5238 | | 11. MILITARY SERVICE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk | | 12. MARITAL STATUS married | |
| 13. EDUCATION—YEARS COMPLETED 12 | | 14. RACE Philippino | | 15. HISPANIC—SPECIFY <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other | |
| 16. USUAL EMPLOYER Cabrillo College | | 17. OCCUPATION Payroll Clerk | | 18. YEARS IN OCCUPATION 6 | |
| 19. RESIDENCE—(STREET AND NUMBER OR LOCATION) 1959 Encina Drive | | 20. CITY Santa Cruz | | 21. COUNTY Santa Cruz | |
| 22. ZIP CODE 95062 | | 23. TIME IN COUNTY 50 | | 24. STATE OR FOREIGN COUNTRY CA | |
| 25. NAME, RELATIONSHIP Steve Sanchez - husband | | 26. MARINE ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 1959 Encina Dr Santa Cruz, CA 95062 | | | |
| 27. NAME OF SURVIVING SPOUSE—FIRST STEVE | | 28. MIDDLE U. | | 29. LAST (MAIDEN NAME) SANCHEZ | |
| 30. NAME OF FATHER—FIRST JOSE | | 31. MIDDLE C. | | 32. LAST SORIA | |
| 33. NAME OF MOTHER—FIRST VICTORIA | | 34. MIDDLE ROMELE | | 35. LAST (MAIDEN) ROMELE | |
| 36. BIRTH STATE Philippines | | 37. BIRTH STATE NM | | 38. BIRTH STATE NM | |
| 39. DATE M/M/DD/CCYY 08/02/2000 | | 40. PLACE OF FINAL DISPOSITION Holy-Cross Cemetery Santa Cruz, CA | | | |
| 41. TYPE OF DISPOSITION(S) BU | | 42. SIGNATURE OF FUNERAL DIRECTOR <i>[Signature]</i> | | 43. LICENSE NO. 7525 | |
| 44. NAME OF FUNERAL DIRECTOR Santa Cruz Memorial Park FH | | 45. PHONE NO. 46. SIGNATURE OF LOCAL REGISTRAR <i>[Signature]</i> | | 47. DATE M/M/DD/CCYY 08/01/2000 | |
| 101. PLACE OF DEATH Dominican Hospital | | 102. IF HOSPITAL, SPECIFY ONE: <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA <input type="checkbox"/> CONV <input type="checkbox"/> RES <input type="checkbox"/> CARE <input type="checkbox"/> OTHER | | 103. FACILITY OTHER THAN HOSPITAL | |
| 104. COUNTY Santa Cruz | | 105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) 1555 Soquel Drive | | 106. CITY Santa Cruz | |
| 107. DEATH WAS CAUSED BY (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D) (A) Lung Cancer with Cervical Spinal Cord Compression | | 108. TIME INTERVAL BETWEEN ONSET AND DEATH 5 months | | 109. DEATH REPORTED TO CORONER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO REFERRAL NUMBER 00R-0403 | |
| 110. BIOPSY PERFORMED <input type="checkbox"/> YES <input type="checkbox"/> NO | | 111. AUTOPSY PERFORMED <input type="checkbox"/> YES <input type="checkbox"/> NO | | 112. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| 113. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 No | | | | | |
| 114. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 113? IF YES, LIST TYPE OF OPERATION AND DATE. Cervical Laminectomy 02/26/2000 | | | | | |
| 114.1. CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. DECEDENT ATTENDED SINCE _____ DECEDENT LAST SEEN ALIVE M/M/DD/CCYY _____ M/M/DD/CCYY _____ | | 115. SIGNATURE AND TITLE OF CERTIFIER <i>[Signature]</i> M.D. | | 116. LICENSE NO. G-14210 | |
| 117. DATE M/M/DD/CCYY 08/01/2000 | | 118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP James Poth, MD, 1668 Dominican Way, Santa Cruz, Ca 95065 | | | |
| 119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED | | 120. INJURY AT WORK <input type="checkbox"/> YES <input type="checkbox"/> NO | | 121. INJURY DATE M/M/DD/CCYY _____ | |
| 122. HOUR _____ | | 123. PLACE OF INJURY _____ | | 124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY) | |
| 125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP) | | | | | |
| 126. SIGNATURE OF CORONER OR DEPUTY CORONER | | 127. DATE M/M/DD/CCYY | | 128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER | |

INFORMATIONAL
NOT A VALID DOCUMENT TO ESTABLISH IDENTITY.

STATE REGISTRAR _____ FAX AUTH. # **000981** CENSUS TRACT _____
 BK- 0509
 PG- 261
 0742425 Page: 2 Of 3 05/01/2009
 000256089 CERTIFIED COPY OF VITAL RECORDS
 STATE OF CALIFORNIA, COUNTY OF SANTA CRUZ

This is a true and exact reproduction of the document officially registered and placed on file in the OFFICE OF THE SANTA CRUZ COUNTY RECORDER.
 DATE ISSUED **FEB 20 2008**
 This copy not valid unless prepared on engraved border displaying date, seal and signature of Recorder.



EXHIBIT "A"

(31)

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/20th interest in and to Lot 31 as shown on Tahoe Village Unit No. 3 - 13th Amended Map, recorded December 31, 1991, as Document No. 268097, re-recorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 081 through 100 (inclusive) as shown on Tahoe Village Unit No. 3, Fifth Amended Map, recorded October 29, 1981, as Document No. 61612, as corrected by Certificate of Amendment recorded November 23, 1981, as Document No. 62661; and (B) Unit No. 082 as shown and defined on said last mentioned map as corrected by said Certificate of Amendment; together with those easements appurtenant thereto and such easements described in the Fourth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for The Ridge Tahoe recorded February 14, 1984, as Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe Phase II recorded February 14, 1984, as Document No. 096759, as amended by document recorded October 15, 1990, as Document No. 236690, and as described in the Recitation of Easements Affecting the Ridge Tahoe recorded February 24, 1992, as Document No. 271619, and subject to said Declarations; with the exclusive right to use said interest in Lots 31, 32 or 33 only, for one week each year in the SPRING/FALL "Season" as defined in and in accordance with said Declarations.

A Portion of APN: 1319-30-721-002

