



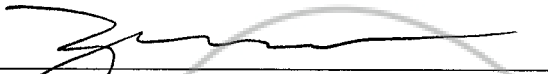
APN: 1420-29-710-008

Recording Requested by and
When Recorded Mail To:
Matthew A. Gray, Esq.
McDonald Carano Wilson LLP
100 W. Liberty St., Fl 10
Reno, Nevada 89501

Send Tax Statements to:

Carole English LeMay
1230 Longmeadow Lane
Lake Forest, IL 60045

The undersigned hereby affirms that this document submitted for recording does contain the personal information of any person or persons as required by NRS 111.365. See Certificate of Death for redaction.



Signature of Declarant or Agent

AFFIDAVIT OF DEATH OF ORIGINAL TRUSTEE

STATE OF NEVADA)
 : ss.
COUNTY OF WASHOE)

CAROLE ENGLISH LEMAY, being first duly sworn, upon oath deposes and says:

1. Affiant is over the age of twenty-one years, legally competent and possessed of her rights; and
2. WILLIAM R. ENGLISH the decedent mentioned in the certified copy of the Certificate of Death attached hereto as EXHIBIT "B", and incorporated herein and made a part hereof by this reference, is the same person as WILLIAM R. ENGLISH, original Trustee of THE WILLIAM R. ENGLISH TRUST, udt: June 22, 1990 (the "Trust"), which



acquired title to certain real property commonly known as 1133 Country Club Drive, Minden, Nevada, under Grant Bargain and Sale Deed recorded as document no. 0702750 on June 11, 2007, and more particularly described on EXHIBIT "A" attached hereto and incorporated herein by this reference.

3. I am the Trustee of the Trust under which said decedent held title as a Trustee pursuant to the Grant Bargain and Sale Deed described above.

4. Upon the recording of this Affidavit, title to the above-referenced property will be held as follows:

Carole English LeMay, Trustee of the William R. English Trust

u/d/t: June 22, 1990

Further your affiant sayeth naught.

DATED: This 1 day of December, 2010.

By: Carole English LeMay
CAROLE ENGLISH LEMAY, Trustee

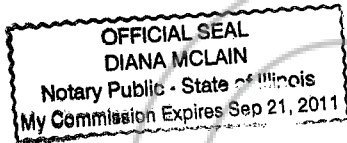


STATE OF ILLINOIS)
) ss.
COUNTY OF LAKE)

On December 1st, 2010, before me, Diana McLain, a Notary Public in and for said County and State, personally appeared CAROLE ENGLISH LEMAY, who proved to me on 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 acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of Illinois that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



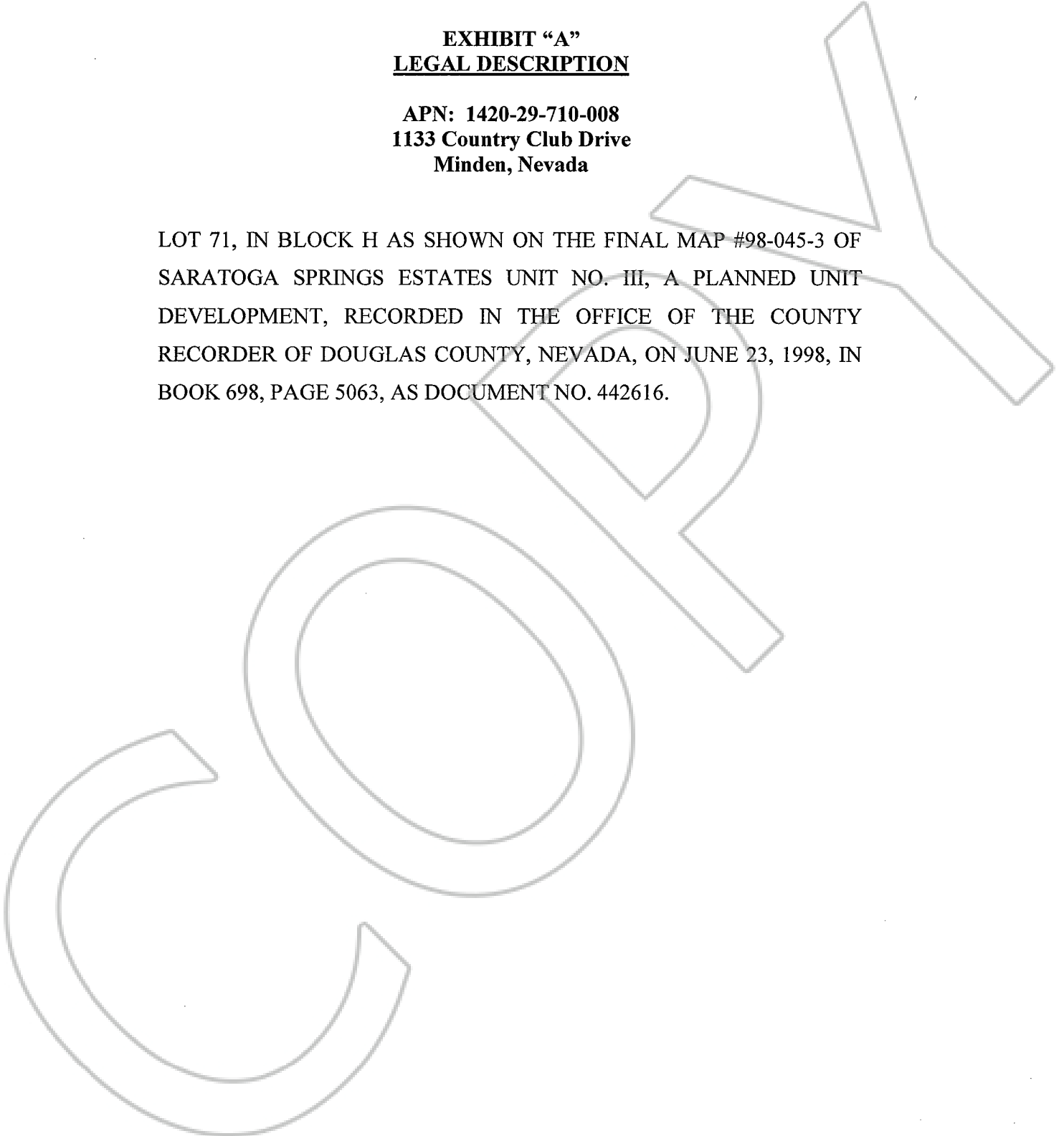
Diana McLain
Notary Public in and for said
County and State



EXHIBIT "A"
LEGAL DESCRIPTION

APN: 1420-29-710-008
1133 Country Club Drive
Minden, Nevada

LOT 71, IN BLOCK H AS SHOWN ON THE FINAL MAP #98-045-3 OF SARATOGA SPRINGS ESTATES UNIT NO. III, A PLANNED UNIT DEVELOPMENT, RECORDED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON JUNE 23, 1998, IN BOOK 698, PAGE 5063, AS DOCUMENT NO. 442616.



CERTIFICATION OF DEATH RECORD

VILLAGE OF LIBERTYVILLE

LIBERTYVILLE, ILLINOIS



BK-1210
PG-2117

775141 Page: 5 of 5 12/08/2010

MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2010 0049709

DATE ISSUED 07/12/2010

DECEDENT'S LEGAL NAME WILLIAM ROBERT ENGLISH				SEX MALE	DATE OF DEATH JULY 09, 2010
COUNTY OF DEATH LAKE		AGE AT LAST BIRTHDAY 84 YEARS	DATE OF BIRTH MARCH 31, 1926		
CITY OR TOWN LIBERTYVILLE		HOSPITAL OR OTHER INSTITUTION NAME ADVOCATE CONDELL MEDICAL CENTER			
PLACE OF DEATH INPATIENT					
BIRTHPLACE DENVER, CO	SOCIAL SECURITY NUMBER ██████ 3015	MARITAL STATUS AT TIME OF DEATH WIDOWED	SURVIVING SPOUSE'S NAME		EVER IN U.S. ARMED FORCES? NO
RESIDENCE 1230 LONGMEADOW LANE		APT. NO.	CITY OR TOWN LAKE FOREST		INSIDE CITY LIMITS? YES
COUNTY LAKE	STATE IL	ZIP CODE 60045	FATHER'S NAME PAUL WILLARD ENGLISH		MOTHER'S NAME PRIOR TO FIRST MARRIAGE FRANCES MUTZIGER
INFORMANT'S NAME CAROLE ENGLISH LE MAYE		RELATIONSHIP DAUGHTER	MAILING ADDRESS 1230 LONGMEADOW LANE, LAKE FOREST, IL, 60045		
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION MOUNT OLIVET MEMORIAL PARK	LOCATION - CITY OR TOWN AND STATE ZION, IL	DATE OF DISPOSITION JULY 12, 2010	
FUNERAL HOME WENBAN FUNERAL HOME LTD, 320 EAST VINE AVENUE, LAKE FOREST, IL, 60045					
FUNERAL DIRECTOR'S NAME CHAD R REULAND			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034015134		
LOCAL REGISTRAR'S NAME KEVIN J BOWENS			DATE FILED WITH LOCAL REGISTRAR JULY 12, 2010		
CAUSE OF DEATH PART I: CARDIAC RESPIRATORY ARREST					
IMMEDIATE CAUSE (Final disease or condition resulting in death)		a. _____ <small>Due to (or as a consequence of)</small>		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH	
		b. CONGESTIVE HEART FAILURE			
		c. _____ <small>Due to (or as a consequence of)</small>		5 MINUTES	
				3 YEARS	
<small>Due to (or as a consequence of)</small>					
PART II. Enter other <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I.				WAS AN AUTOPSY PERFORMED? NO	
				WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A	
DID TOBACCO USE CONTRIBUTE TO DEATH?		FEMALE PREGNANCY STATUS		MANNER OF DEATH	
		NOT APPLICABLE		NATURAL	
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY		INJURY AT WORK?	
LOCATION OF INJURY:					
DESCRIBE HOW INJURY OCCURRED:				IF TRANSPORTATION INJURY, SPECIFY:	
ATTEND THE DECEASED? YES	DATE LAST SEEN ALIVE JULY 02, 2010	WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO	DATE PRONOUNCED	TIME OF DEATH 02:02 AM	
CERTIFIER PHYSICIAN				DATE CERTIFIED JULY 12, 2010	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH KURT BROTHERRSON, 700 N. WESTMORELAND DRIVE, SUITE B, LAKE FOREST, ILLINOIS, 60045				PHYSICIAN'S LICENSE NUMBER 036-061673	

This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health.

Kevin J. Bowens

Kevin J. Bowens

Village Of Libertyville, Local Registrar

