DOC # 0777213 sc 01/20/2011 04:00 PM Deputy: sc

OFFICIAL RECORD Requested By:

ELI GUAJARDO

Oct. 2009

14.00 0.00

| | Douglas County - NV |
|---|--|
| DECLARATION OF HOMESTEAD | Karen Ellison - Recorder |
| Assessor Parcel Number: 1319-19-802-010 | Page: 1 Of 1 Fee: |
| OR | BK-0111 PG-4300 RPTT: |
| Assessor's Manufactured Home ID Number: | |
| | |
| Recording Requested by and Mail to: Name: ELI GUAJARDO | \ \ |
| Address: P.O. BOX 690A | _ \ \ |
| Address: P.O. BOX 6906 City/State/Zip: S741ELINE, NV, 89449 | |
| Check One: | |
| ☐ Married (filing jointly) ☐ Married (filing individually) | |
| ☐ Head of Family ☐ Widowed | |
| ☐ Single Person ☐ Multiple Single Persons | |
| ☐ By Wife (filing for joint benefit of both) | |
| ■ By Husband (filing for joint benefit of both) | |
| Other (describe): | <u> </u> |
| Check One: | |
| Regular Home Dwelling/Manufactured Home 🗆 Condominium Unit 🗆 Other | |
| Name on Title of Property | / / |
| ELI GUAJARDO & MOJELINDA GUAJARDO | |
| do individually or severally certify and declare as follows: | |
| | |
| is/are now residing on the land, premises (or manufactured home) located in the city/town of STATE 2 INE, | |
| County of ODUG LAS, State of Nevada, and more particularly described as follows: | |
| (set forth legal description and commonly known street address OR manufactured hon | ne description) |
| 247 TRAM WAY | \ / |
| | ~ |
| I/We claim the land and premises hereinabove described, together with the dwelling h | ouse thereon, and its appurtenances, or |
| the described manufactured home as a Homestead. | /. |
| In Witness, Whereof, I/we have hereunto set my hand/our hands this day of | (CNUA)(20_//_ |
| er M | |
| Signature | Signature |
| ELI GUAJAROO | |
| Print or type name here | unt or type name here |
| STATE OF NEVADA, COUNTY OF () () () () () | Notary Seal |
| This instrument was acknowledged before me on 1/20/11 | |
| by The JUGUSOO (date) | |
| Person(s) appearing before notary | NOTARY PUBLIC |
| | STATE OF NEVADA |
| Person(s) appearing beforemotary | County of Douglas SHANNON DECORSE |
| 11 MINOR 1 De CONSE | Appt No. 06-109021-5 My Appt Expires October 2 2014 |
| Signature of notarial officer | |
| CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S | į |
| FITNESS FOR YOUR PURPOSE. | |

NOTE: Leave space within 1-inch margin blank on all sides.