This document includes a certified death certificate as required by NRS 40.525 (5) which contains a social security number as required by NRS 440.380(1)(a).

Known M. Kamurishi

Kristin M. Kaminski ANDERSON, DORN & RADER, LTD.

APN: 29-162-23

RECORDING REQUESTED BY:

Bryce L. Rader, Esq. Anderson, Dorn & Rader, Ltd. 500 Damonte Ranch Parkway, Ste, 860 Reno, Nevada 89521

WHEN RECORDED MAIL TO:

JENNIFER LYNN RICHARDSON, M.D. 2025 Cobblestone Road Jasper, Indiana 47546

MAIL TAX STATEMENTS TO:

JENNIFER LYNN RICHARDSON, M.D. 2025 Cobblestone Road Jasper, Indiana 47546

AFFIDAVIT OF SUCCESSOR TRUSTEE

I, JENNIFER LYNN RICHARDSON, M.D., the undersigned, affirm under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

- (1) By instrument dated April 09, 2001, HARRY W. EDGAR and KATHLEEN EDGAR executed the EDGAR LIVING TRUST ("Trust").
- (2) Said trust appointed JENNIFER LYNN RICHARDSON, M.D. to serve as sole Successor Trustee upon the death, incapacity, or resignation of HARRY W. EDGAR and KATHLEEN EDGAR.
- (3) HARRY W. EDGAR died on March 18, 2008, at Reno, Nevada, a resident of Washoe County, Nevada. Attached hereto as Exhibit "A" is a certified copy of the death certificate of said HARRY W. EDGAR.
- (4) KATHLEEN EDGAR resigned as Trustee on January 30, 2012.

DOC # 807571

08/17/2012 09:59AM Deputy: PK
 OFFICIAL RECORD
 Requested By:
Anderson, Dorn, & Rader, Louglas County - NV
 Karen Ellison - Recorder
Page: 1 of 4 Fee: \$17.00
BK-812 PG-4034 RPTT: 0.00

BK 812 PG-4035 807571 Page: 2 of 4 08/17/2012

(5)	Pursuant to the terms of the Trust, I have assumed the responsibilities	of sol	le
	Successor Trustee.	. 1	Ĺ

- (6) The following described real property is part of the trust estate: See Exhibit "B" attached.
- (7) I am authorized under the terms of the Trust and applicable provisions of the Nevada Revised Statutes to act as the Successor Trustee with respect to the trust's interest in the described property.
- (8) No other person has a right to the interest of the Trust in the described property.
- (9) The described property shall be transferred to me as Successor Trustee.

the Tuly	- 1
Executed on this day of March, 2012, in the City of, Indiana.	
JENNIFER LYNN RICHARDSON, M.D., Successor Trustee	Δ <i>/</i>)
STATE OF INDIANA)	

STATE OF INDIANA) ss COUNTY OF DUBOIS)

SUBSCRIBED AND SWORN TO before me this ______ day of Warelf, 2012, by JENNIFER LYNN RICHARDSON, M.D..

Jothry Public

Comm. exp 5-24-1

STATE OF NEVAD CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH VITAL STATISTICS

		CERTIFI	CATE OF DEATH		008004462
TYPE OR PRINT IN	1a. DECEASED-NAME (FIRST MIDDLE	FLAST SUFFOX)			TE FILE NUMBER
PRINTIN	The second secon	GAR JR		2. DATE OF DEATH (Mo/Day/Yea	f) 3a. COUNTY OF DEATH
BLACK INK	3b_CITY, TOWN, OR LOCATION OF DE		ISTITUTION Name/If not either, ris	March 18, 2008	Douglas
DECEDENT	Gardnerville	and number)	Valley Medical Center	Inpatient(Specify)	patient Male
	5. RACE White (Specify)	6. Hispanic Origin? No - Non-Hispan	Specify 7a. AGE-Last birthday (Years) 76	7b. UNDER 1 YEAR 7c. UNDER MOS DAYS HOURS	1 DAY 8 DATE OF BIRTH (Mo/Day/Yr)
IF DEATH OCCURRED IN	9a. STATE OF BIRTH (If not U.S.A.; name country). California	9b. CITIZEN OF WHAT COUNTRY United States		NEVER MARRIED, WIDOWED, ecify) Married	September 16, 1931 12. SURVIVING SPOUSE (if wife, give
INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF	13. SOCIAL SECURITY NUMBER -1128	14a, USUAL OCCUPATION (Give I	Kind of Work Done During Most of	14b. KIND OF BUSINESS OR I	
RESIDENCE ITEMS	15a. RESIDENCE-STATE 15b. Co		Onstruction Manager TOWN OR LOCATION 15d	Automotive STREET AND NUMBER	Forces? (Yes) 15e. INSIDE CITY LIMITS (Specify Yes)
PARENTS	Nevada 16. FATHER- NAME (First Middle: La	Douglas st suffix)		9 Lyell Way - NAME (First Middle Läst Suffix	or No) Yes
PARENIS	Harry 18a: INFORMANT- NAME (Type or Print	William EDGAR		Alice YO	 107
	Kathleen ED	GAR	.759 L	yell Way Gardnerville, Nevada	the same of the sa
DISPOSITION	Cienaudi		Walton's Sierra Cremat		TION City or Town State Carson City Nevada 89706
	20a FUNERAL DIRECTOR - SIGNATUR RICK N		RECTOR LICENSE	ME AND ADDRESS OF FACILITY Walton's Douglas	County Mortuary
		UTHENTICATED	620	1478 4th Street M	inden NV 89423
ARADE CALL	TRADE CALL - NAME AND ADDRESS	man and the second of the seco			The Contract of the State of th
	호 호 due to the cause(s) stated/ (Sign	e, death occurred at the time, date a ature & Title) SIGNATURE AUT TTENBERG D.O.	id place and A 22a. On the time;	he basis of examination and/or investigate and place and due to the cause	tigation, in my opinion death occurred at (s) stated. (Signature & Title)
CERTIFIER	୍ଦି 🖁March 20, 2008	13:53	log iii	TE.SIGNED (Mo/Day/Yr) , , , ∖ , , , , , , , , , , , , , , ,	22c. HOUR OF DEATH
	ビザ (Type or Print)	SICIAN IF OTHER THAN CERTIFIE	12-8	ONOUNCED DEAD (Mo/Day/Yr)	22e. PRONOUNCED DEAD AT (Hour)
	23a. NAME AND ADDRESS OF CERTIF	IER (PHYSICIAN, ATTENDING PHY enberg D.O.: 550 W.Washi	SICIAN, MEDICAL EXAMINER, OF ngton #1 Carson City, NV	CORONER) (Type of Print) ////89701	236 LICENSE NUMBER DO674
REGISTRAR	24a. REGISTRAR (Signature)	SARAH KOERNER	24b. DATE REGEIV (Mo/Day/Yr)	Section Control of the Control of th	TH DUE TO COMMUNICABLE DISEASE
		IGNATURE AUTHENTICATED	The state of the s	/larch 24, 2008	YES NO X
CAUSE OF DEATH	PARTI (a) Cardiopulmon	And the second s	OR (a), (b), AND (c)))		Interval between onset and death- Hours
CONDITIONS IF	DUE,TO, OR AS A GO O Pancytopenia	NSEQUENCE OF:			Interval between onset and death Months
ANY WHICH GAVE RISE TO IMMEDIATE	DUE TO, OR AS A GO Myelofibrosis	NSEQUENCE OF:			Interval between onset and death
CAUSE -> STATING THE UNDERLYING CAUSE LAST	DUE TO, OR AS A CO	ISEQUENCE OF:			Months Interval between onset and death
CAUSE LAST	(d) PARTIL OTHER SIGNIFICANT CONDIT		th but not resulting in the underlying	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	UTOPSY 27 WAS CASE REFERRED
	Mucormycosis Infe 28a, ACC., SUICIDE, HOM., UNDET, OR 28b, DA	一切的。 安徽 法国际 对于国际的特殊	HOUR OF INJURY 284 DESCRIBE	HOW INJURY OCCURRED.	cify Yes or No) TO CORONER (Specify Yes or No) Yes
	PENDING INVEST. (Specify) 28e: INJURY AT WORK (Specify, 28f. P.				
Eu <u>===</u>	Yes or No) buildir	g, etc. (Specify)	reet, factory, office 28g. LOCATIO	ON STREET OR R.F.D. No.	CITY OR TOWN STATE
#\$ 			STATE REGISTRAR		

BK 812 PG-4036

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201101

CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED;

MAR 2 4 2008 This copy is not valid unless prepared on engraved border displaying date, seal and signature of Registrar







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EXHIBIT "B"

Legal Description:

A parcel of land located within a portion of the Northwest one-quarter (NW 1/4) of Section 22, Township 12 North, Range 20 East, Mount Diablo Meridian, Douglas County, Nevada, described as follows:

Commencing at the Northwest corner of Lot 3 of that certain subdivision plat known as Gardnerville Ranchos Unit No. 5 recorded as Document No. 50056, Book 80, Page 675 of Official Records of Douglas County, Nevada; thence along the North boundary of said subdivision North 89 degrees 52'50" East, 373.40 feet to a point which is common to the North boundary of said subdivision and the Easterly right-of-way of Lyell Way; thence South 00 degree 16'11" East along the Easterly right-of-way of Lyell Way, 740.00 feet to the POINT OF BEGINNING;

thence North 89 degrees 52'50" East, 150.00 feet; thence South 01 degrees 18'42" East, 55.36 feet; thence South 00 degrees 05'51" East, 110.00 feet; thence South 89 degrees 54'09" West, 150.68 feet; thence North 00 degrees 16'11" West, 165.29 feet to the POINT OF BEGINNING, containing 24,918 square feet, more or less.

Said land is also known as Adjusted Lot 83 as shown on that certain Record of Survey filed in the Office of the County Recorder of Douglas County, State of Nevada, recorded on February 1, 1995, in Book 295, Page 109, as Document No. 355402, to support a boundary line Adjustment.

APN: 29-162-23

Property Address: 759 Lyell Way, Gardnerville, Nevada 89460