OFFIC-440 4/2003

Title Order No. 1420 - 06 - 502 - 015 RYAN HOWES DOUGLAS COUNTY RECORDERS Karen Ellison - Recorder Page: 10f4 Fee: \$ 17.00 WHEN RECORDED MAIL TO: Bk: 0413 Pg: 4549 I Name - Rypn Howes 31292 LOTUST CT Street Address City & TEMECULA, CA, 92592 Sinte _ TEMECULA, CA, 92592 MAIL TAX STATEMENTS TO: EPICE ABOVE THIS LINE FOR RECORDERS USE NOTICE OF COMPLETION NOTICE is hereby given that: 1. The undersigned is owner of the interest stated below in the property hereinafter described; 2. The NAME (including that of the undersigned), ADDRESS and NATURE OF TITLE of every person Owning any interest in such property is as follows: **FULL ADDRESS** NATURE OF TITLE FLEL NAME 31292 LOCUST CT owner 3. The names and addresses of the transferors to the undersigned owner are (to be shown if the undersigned is a successor in interest of the owner who caused the improvement to be constructed.) 4. A work of improvement on the property hereinafter described was COMPLETED on 12 5. The name of the CONTRACTOR, if any, for such work of improvement was KR construction (If no Contractor, lesert MONE'S 6. The property on which said work of improvement was completed is in the City of CMSO CITY County of Douglas , State of Nevada, and is described as follows: Ger Calunit's

Doc Number: 0821849 04/17/2013 11:12 AM

OFFICIAL RECORDS

Requested By

BK 04 13 PG 4550 4/17/20 13

7. The street address of said property is 956 TOPSY LA, STE 100.
CAMSON 6179, NV 89705
4/2/13
Dated 3/25/13 Signature of Owners Par M
STATE OF NEVADA COUNTY OF The person(s) whose name(s) is/are subscribed to the willtin instrument, being duty swom, say(s) that he/shrument in the nowner(s) of the aforesaid interest or setzle in the necessity of the aforesaid interest.
ne/sna/they is/are the owner(s) of the aforesaid interest or estate in the property described in the foregoing notice; that he/sha/thay has/have read the same and know(s) the contents thereof; that the facts stated are true; and that he/sha/they executed the same in his/her/their authorized capacity(ies). SUBSCRIBED AND SWORN TO before me on Signature
Name(typed or printed)

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

BK: Ø4 13 PG: 455 1

4/17/2013

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On <u>April 2, 2013</u> before me, /m//	(Here insert name and tiple of the officer)
personally appeared Lyan Howes	
the within instrument and acknowledged to me th	lence to be the person(s) whose name(s) is/gre subscribed to at he/she/they executed the same in his/her/their authorized on the instrument the person(s), or the entity upon behalf of it.
I certify under PENALTY OF PERJURY under the is true and correct.	e laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal.	JOY PICCIRILLO Commission # 1948206 Notary Public - California Riverside County My Comm. Expires Aug 14, 2015
Signature of Notas Public	(Notary Seal)
ADDITIONAL OF	PTIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT Mail of (amplication)	INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer) Please check the document carefully for proper notarial wording and attach this form if required.
Number of Pages Document Date Signed 4.2.13 (Additional information)	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s) Other	notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they; is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date.
	corporate officer, indicate the title (i.e. CEO, CFO, Secretary). • Securely attach this document to the signed document

State of California

County of Killer SI So

BK 911 PG-96 788975 Page: 6 of 6 09/01/2011

EXHIBIT "A"

Parcel 2 of Parcel Map No. LDA 07-062, recorded in the office of the County Recorder of Douglas County, State of Nevada, on October 7, 2009 in Book 1009, Page 1542 as Document No. 751901, Official Records.

