



APN: A portion of 42-254-29

WHEN RECORDED MAIL TO:
DEBBIE Y. BAE, ESQ.
HOPKINS & CARLEY, A LAW CORPORATION
70 SOUTH FIRST STREET
SAN JOSE, CA 95113

Affidavit of Successor Trustee

I, WADE N. KATSUYOSHI, 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 October 20, 1995, Ernest A. Katsuyoshi executed the Ernest A. Katsuyoshi Living Trust.
2. Said trust appointed me to serve as Successor Trustee upon the death or incapacity of Ernest A. Katsuyoshi.
3. Ernest A. Katsuyoshi died on September 23, 2013 in Santa Clara County, California, a resident of Santa Clara County, California pursuant to the attached certified copy of the Certificate of Death.
4. Pursuant to the terms of the Trust, I have assumed the responsibilities of Successor Trustee.
5. The real property subject hereof is part of the trust estate, situated in the County of Douglas, State of Nevada, bounded and described as follows:

See Exhibit A

Per NRS 111.312, this legal description was previously recorded as Document No. 358595 and as Book 0395, Page 3564 on March 24, 1995, in the office of the Recorder of Douglas County, Nevada.

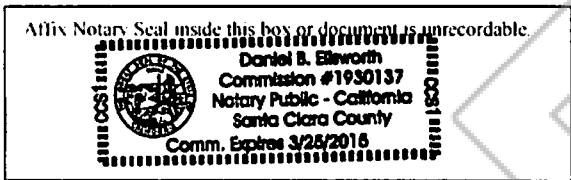
6. No other person has a right to the interest of the Trust in the described property.
7. The described property shall be transferred to WADE N. KATSUYOSHI as Successor Trustee.



WADE N. KATSUYOSHI

STATE OF California
COUNTY OF Santa Clara

Subscribed and sworn before me on 11-26-2013, by WADE N. KATSUYOSHI.



Daniel B. Ellsworth, Notary Public
Notary Public

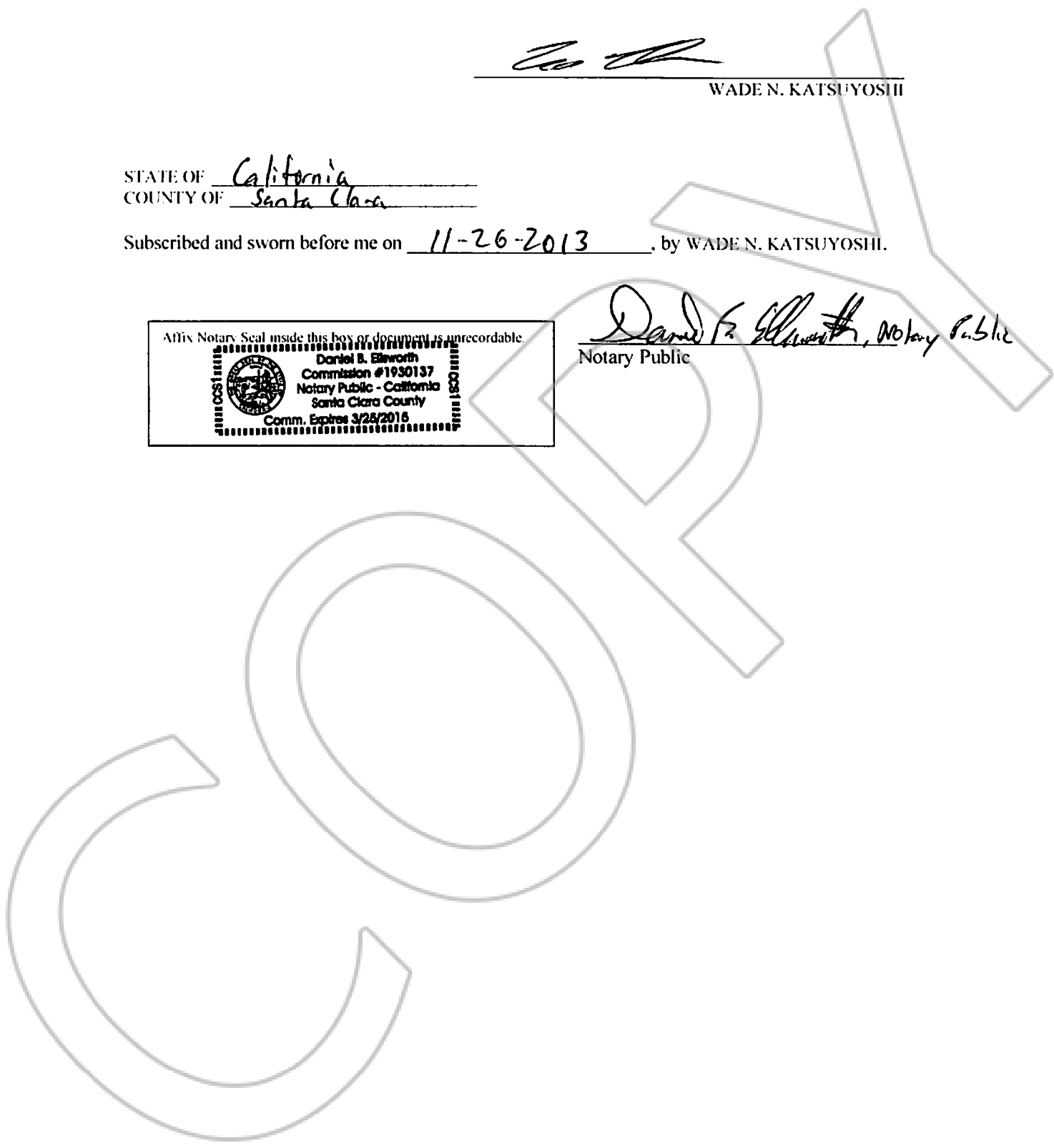




EXHIBIT A

An undivided 1/102nd interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/50th interest in and to Lot 28 as shown on Tahoe Village Unit No. 3-13th Amended Map, recorded December 31, 1991, as Document No. 268097, rerecorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 1 through 50 (inclusive) as shown on said map; and (B) Unit No. 29 as shown and defined on said map; 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 Six recorded December 18, 1990, as Document No. 241238, as amended by Amended Declaration of Annexation of The Ridge Tahoe Phase Six, recorded February 25, 1992, as Document No. 271727, 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 Lot 28 only, for one week every other year in Odd-numbered years in accordance with said Declarations.

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY of SANTA CLARA
PUBLIC HEALTH DEPARTMENT
VITAL RECORDS AND REGISTRATION

CERTIFICATE OF DEATH

3201343007647

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given)		3. LAST (Family)	
ERNEST		KATSUYOSHI	
2. MIDDLE		AKIRA	
4. DATE OF BIRTH		5. AGE Yrs.	6. SEX
04/09/1938		75	M
9. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER	11. EVER IN U.S. ARMED FORCES?
HI		6651	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK
13. EDUCATION - Highest Level (See worksheet on back)		14. WAS DOB/DONOR REGISTRATION/ORGAN? (If yes, see worksheet on back)	16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back)
SOME COLLEGE <input type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	JAPANESE
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.)	19. YEARS IN OCCUPATION
CORRECTIONAL OFFICER		LAW ENFORCEMENT	25
20. DECEDENT'S RESIDENCE (Street and number, or location)			
17732 CALLE VIENTO COURT			
21. CITY		22. COUNTY/PROVINCE	23. ZIP CODE
MORGAN HILL		SANTA CLARA	95037
24. YEARS IN COUNTY		25. STATE/FOREIGN COUNTRY	
54		CA	
26. INFORMANT'S NAME, RELATIONSHIP		27. INFORMANT'S ADDRESS (Street and number, or rural route number, city or town, state and ZIP)	
WADE KATSUYOSHI, SON		18655 ARGUELLO AVE, MORGAN HILL, CA 95037	
28. NAME OF SURVIVING SPOUSE/STEP-FIRST		29. MIDDLE	30. LAST (BIRTH NAME)
MYLVA		-	MODELO
31. NAME OF FATHER/PARENT-FIRST		32. MIDDLE	33. LAST
ROBERT		TOSHIO	KATSUYOSHI
34. BIRTH STATE		35. BIRTH STATE	
HI		HI	
36. NAME OF MOTHER/PARENT-FIRST		36. MIDDLE	37. LAST (BIRTH NAME)
EVEYLYN		MIYOSHI	NAGATA
38. BIRTH STATE		39. BIRTH STATE	
HI		HI	
40. PLACE OF FINAL DISPOSITION			
OAK HILL MEMORIAL PARK			
300 CURTNER AVE, SAN JOSE, CA 95125			
41. TYPE OF DISPOSITION(S)		42. SIGNATURE OF EMBALMER	43. LICENSE NUMBER
CR/BU		NOT EMBALMED	-
44. NAME OF FUNERAL ESTABLISHMENT		45. LICENSE NUMBER	46. SIGNATURE OF LOCAL REGISTRAR
OAK HILL FUNERAL HOME		FD 991	SARA H. CODY, MD
47. DATE		10/01/2013	
101. PLACE OF DEATH			
OWN RESIDENCE			
104. COUNTY		105. CITY	
SANTA CLARA		MORGAN HILL	
106. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location)			
17732 CALLE VIENTO COURT			
107. CAUSE OF DEATH			
Enter the chain of events - diseases, injuries, or complications - that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT abbreviate.			
IMMEDIATE CAUSE (Final disease or condition resulting in death)		108. DEATH-REPORTED TO CORONER?	
PRIMARY LUNG ADENOCARCINOMA WITH MALIGNANT PLEURAL EFFUSION		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
109. COPY BY PERFORMED?		110. ALTOUSY PERFORMED?	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
111. USED IN DETERMINING CAUSE?		112. IF OTHER THAN HOSPITAL, SPECIFY ONE	
<input type="checkbox"/> YES <input type="checkbox"/> NO		Nursing Home/ LTC <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> Other <input type="checkbox"/>	
113. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107			
NONE			
114. NO OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date)			
NO			
115. SIGNATURE AND TITLE OF CERTIFIER		116. LICENSE NUMBER	117. DATE
MYRON S KWONG M.D.		A86563	10/01/2013
118. TYPE ATTESTING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		MYRON S KWONG M.D.	
270 INTERNATIONAL CIRCLE, SAN JOSE, CA 95119			
119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED			
120. INJURED AT WORK?			
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK			
121. INJURY DATE			
122. HOUR (24 hours)			
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)			
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)			
125. LOCATION OF INJURY (Street and number, or location, and city, and zip)			
126. SIGNATURE OF CORONER / DEPUTY CORONER		127. DATE	128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER

BK 1213
 PG-859
 835013 Page: 4 of 4 12/06/2013



CERTIFIED COPY OF VITAL RECORDS
 STATE OF CALIFORNIA } SS DATE ISSUED **OCT 03 2013**
 COUNTY OF SANTA CLARA } By

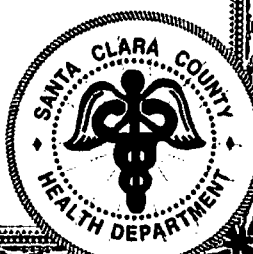


This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF PUBLIC HEALTH.

Effective 09/14/2013 Interim

Sara H. Cody

Martin D. Fensterseh
 MARTIN D. FENSTERSEH MD
 HEALTH OFFICER AND LOCAL REGISTRAR
 OF BIRTHS AND DEATHS



This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

ANY ALTERATION OR ERASURE voids THIS CERTIFICATE