Recording Requested by Shayla Palmer

/ and when recorded return to: P.O. Box 12175 Zephyr Cove, NV 89448

Doc Number: 0836134

12/30/2013 02:31 PM OFFICIAL RECORDS Requested By

SHAYLA PALMER

DOUGLAS COUNTY RECORDERS Karen Ellison - Recorder

Page: 1 0f 2 Fee: \$ 15.00 Bk: 1213 Pg: 5399 RPTT # 7 Deputy sg

Space above for Recorders Use

OUITCLAIM DEED

Grantor, Shayla Palmer Malmsater, grants, releases and forever quitclaims her interest to Shayla Palmer as trustee on behalf of the "Shayla Palmer Revocable Trust" the property located in the County of Douglas, State of Nevada, commonly known Unit 10, as set forth on the Official Plat of Cave Rock as: Villas, being a subdivision of Lot 3, Cave Rock Estates No. 1, recorded August 16, 1977, as Document No. 12016, Official Records of Douglas County, State of Nevada.

TOGETHER WITH an undivided 1/22 interest in and to that portion designated as Common Area as set forth on the Official Plat of Cave Rock Villas, being a subdivision of Lot 3, Cave Rock Estates No. 1, recorded August 16, 1977, as Document No. 12016, Official Records of Douglas County, Nevada.

Per NRS111,312, the legal description was previously recorded as Document No. 33350, Book 679, Page 661 on June 8, 1979.

THIS CONVEYANCE TRANSFERS

DOCUMENTARY TRANSFER TAX: \$NONE

GRANTORS' INTEREST INTO

Computed by:

THEIR REVOCABLE INTERVIVOS TRUST WITHOUT CONSIDERATION.

> Heidi L. Kugler Attorney at Law

A.P.N.: 1418-27-411-010

Executed on

Callfornia.

Shayla Palmer Malmsater , Grantor

Send tax statements to:

Shayla Palmer, P.O. Box 12175, Zephyr Cove, NV 89448



BK: 1213 PG 5400 12/30/2013

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California)
County of Los Angeles	()
County of Los Moyele 5	
On <u>Dec /9, 20/3</u> before me, <u>Mari</u>	Here Insert Name and Title of the Officer Palmer Name(s) of Signer(s)
paragraphy appeared Should	Here insert Name and Title of the Officer
personally appeared	Name(s) of Signer(s)
	who proved to me on the basis of satisfactory
	evidence to be the person(e) whose name(e) is/are
	subscribed to the within instrument and acknowledged
***************************************	to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by
MARIANNE J. SIMON	his/her/their signature(s) on the instrument the
Commission # 1938954 Notary Public - California	person(s), or the entity upon behalf of which the
Los Angeles County	person(s) acted, executed the instrument.
My Comm. Expires Jun 25, 2015	I certify under PENALTY OF PERJURY under the
	laws of the State of California that the foregoing
	paragraph is true and correct.
	WITNESS my hand and official seal.
/ /	Signature: Marioux et Sumon
Place Notary Seal Above OPTIC	Signature of Natary Public
Though the information below is not required by la	w, it may prove valuable to persons relying on the document
1 1	nd reattachment of this form to another document.
Description of Attached Document Title or Type of Document:	m Dad
Document Date: 12/19/13	Number of Pages:
Signer(s) Other Than Named Above:	/ /
Capacity(ies) Claimed by Signer(s)	
Signer's Name:	Signer's Name:
☐ Corporate Officer — Title(s):	☐ Corporate Officer — Title(s):
☐ Individual ☐ Individual ☐ OF SIGNER	NT Individual RIGHT THUMBPRINT OF SIGNER
☐ Partner — ☐ Limited ☐ General Top of thumb her	□ Destroy □ Limited □ Consess
☐ Attorney in Fact	☐ Attorney in Fact
☐ Trustee	□ Trustee
☐ Guardian or Conservator	☐ Guardian or Conservator
Other:	☐ Other:
Signor la Donrogantina	Single Bonnesonting
Signer Is Representing:	Signer Is Representing: