

**RECORDING REQUESTED BY and
WHEN RECORDED MAIL TO:**

Lorna J. Drope, J.D., LL.M.
1550 The Alameda, Suite 206
San Jose, CA 95126



00013582201508618480030036

KAREN ELLISON, RECORDER

MAIL TAX STATEMENTS TO:

Penny Hunter
6314 Culvert Drive
San Jose, CA 95123

APN: ~~1~~121-05-515-012

AFFIDAVIT AND CERTIFICATE OF SUCCESSOR TRUSTEE

STATE OF NEVADA)
) ss.
COUNTY OF DOUGLAS)

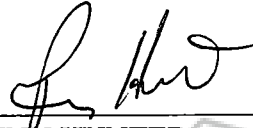
PENNY HUNTER, being first duly sworn, deposes and says:

1. That POLLY ANN MEARS, the decedent in the attached certified copy of Certificate of Death, is the same person as POLLY ANN MEARS, named as Trustee of Trust A, the Survivor's Trust, created under the MEARS FAMILY TRUST dated April 28, 1998.
2. That at the time of the decedent's death, decedent was the record owner, as Trustee, of certain real property commonly known as 50 Conner Way, Minden, Nevada 89410, acquired by a Grant, Bargain and Sale Deed recorded on May 6, 2011 as Instrument No. 0782888 of Official Records of Douglas County, Nevada.
3. That PENNY HUNTER hereby files this certificate and accepts the Trusteeship, to serve as Trustee of Trust A, the Survivor's Trust, created under the MEARS FAMILY TRUST DATED APRIL 29, 1998; and
4. The legal description of said property is as follows:

Lot 141, as set forth on Record of Survey for PINEVIEW DEVELOPMENT, UNIT NO. 5 filed for record in the office of the Douglas County Recorder on July 26, 2004, in Book 0704, page 10502, as Document No. 619666.

The undersigned hereby affirms that this document submitted for recording does not contain a social security number.

Dated this 27 day of April, 2015.



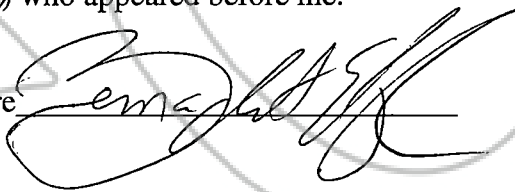
PENNY HUNTER

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

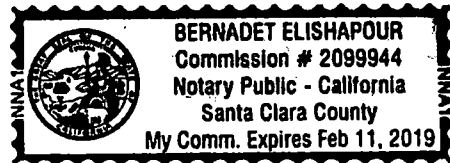
State of California)
County of Santa Clara)

Subscribed and sworn to (or affirmed) before me on this 27th day of April, 2015, by PENNY HUNTER, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature



(Seal)



STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SANTA CLARA

PUBLIC HEALTH DEPARTMENT
VITAL RECORDS AND REGISTRATION

CERTIFICATE OF DEATH

3201543001080

Form with multiple sections: DECEASED'S PERSONAL DATA, USUAL RESIDENCE, SPOUSHIP AND PARENT INFORMATION, FUNERAL/DIRECTOR/LOCAL REGISTRAR, PLACE OF DEATH, CAUSE OF DEATH, PHYSICIAN'S CERTIFICATION, CORONER'S USE ONLY. Includes fields for name, date of birth, social security number, marital status, occupation, residence, and cause of death.

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA }
COUNTY OF SANTA CLARA } SS

DATE ISSUED
FEB 20 2015



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 10/12/2013

Handwritten signature: Sean A. Colyvas

Handwritten signature: Martin D. Fensterheib
MARTIN D. FENSTERHEIB
HEALTH OFFICER AND LOCAL REGISTRAR
OF BIRTHS AND DEATHS

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

PHNCO (Rev) 05/11

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

